

07/19/2005

**NOTICE OF ERROR  
REPLY**

Please type or print clearly, fill out this form completely and mail.

Return this reply form to IDWR by the deadline date printed below if you want IDWR to change your recommendation or you want to let IDWR know that you agree with its recommendation.

**YOUR DEADLINE FOR RETURNING A NOTICE OF ERROR REPLY IS:**

Water right number: 21-10153

EVA S ROICE

PO BOX 161

TETON ID 83451

Telephone Number: (208)624-7510

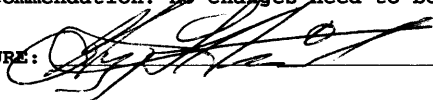
1. Describe the portion of the proposed recommendation with which you disagree (e.g. priority date, period of use, source):

on 10/6/05 Gregg Hinkle and Eva Roice came to the office and visited Ryan Mikesell. We agreed to make this claim a domestic w/ 2 homes and small business.

2. Describe the changes you wish to make in the proposed recommendation:

3. Give a brief explanation as to why you disagree with these portions:

       I AGREE with this proposed recommendation: ~~no changes need to be made.~~

DATE: 10-6-05 SIGNATURE: 

Please print your name: \_\_\_\_\_

IDWR Regional Office, 900 N Skyline Dr Ste A, Idaho Falls, ID 83402, 2085257161

RECEIVED

OCT 04 2005

Department of Water  
Eagle, ID

KMT  
10/11