

RECEIVED

MAR 24 2003

02/18/2003

WATER RESOURCES  
WESTERN REGION

NOTICE OF ERROR  
REPLY

*Craig*

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: April 21, 2003

Water right number: 29-7076

ASH GROVE CEMENT CO  
6720 SW MACADAM AVE  
STE 300  
PORTLAND OR 97219-2312  
Telephone Number: (503)293-2333

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

QUANTITY, BOTH CFS AND AFT.

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

CHANGE CFS TO 0.75 AND REMOVE ~~THE~~ AFT RESTRICTION.

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

STATE OF IDAHO DEC CLAM # 29-4069 STATES FOR ABOVE QUANTITY

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

DATE: 3/10/03 SIGNATURE: *GAL*

Please print your name: CHRIS A. PULSAN

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