

07/15/2005

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: 27-12000

PRESTON R ALLEN & SONS PARTNERSHIP
2601 E 300 S
DECLO ID 83323
Telephone Number: (208) 349-5599

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

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: 9-21-05 SIGNATURE: Kent P. Allen

Please print your name: Kent P. Allen

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

FAXED
9-21-05
IF AT

SEP 21 2005
[Signature]

05/26/2005

NOTICE OF ERROR
REPLY

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YOUR DEADLINE FOR RETURNING A NOTICE OF ERROR REPLY IS:

Water right number: 27-12000

PRESTON R ALLEN
2601 E 300 S
PO BOX 63
DECLO ID 83323
Telephone Number: (208)349-5573

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

I disagree that it ^{is} not being recommended

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

I would like to see the right recommended

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

water was used 50% or more of the time
after 7-1 when water was available

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

DATE: 9-21-05 SIGNATURE: Kent P. Allen
Please print your name: Kent P. Allen

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

FAXED
9-21-05
JP

