

12/04/2006

RECEIVED

NOTICE OF ERROR
REPLY

DEC 21 2006

DEPARTMENT OF
WATER RESOURCES

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: **ASAP**

Water right number:

37-20756	37-20775
37-20761	37-20782
37-20768	37-20789

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:

12/20/06

SIGNATURE:

Lori Sewell

Peter Z Sewell

Please print your name:

Lori Sewell

Peter Z Sewell

IDWR Regional Office, 1341 Fillmore St, Suite 200, Twin Falls, ID 83301, 2087363033