

KMS  
12104

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

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

\_\_\_\_\_  
DATE: SIGNATURE:

*Paul J. Allen*

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

*Priority rate should be 1880*

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

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

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

LOWDER SLOUGH CANAL CO  
C/O LOIS POOLE  
4483 E 400 N  
RIGBY ID 83442  
Telephone Number: (208)538-7745

Water right number: 1-119

**YOUR DEADLINE FOR RETURNING A NOTICE OF ERROR REPLY IS: November 30, 2006**

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.

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

NOTICE OF ERROR  
REPLY

11/21/2006