

02/09/2006

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: 22-683B

RICHARD HOWARD GEBHARD

PO BOX 168

VICTOR ID 83455

Telephone Number: (208)787-2405

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

— None —

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

— None —

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

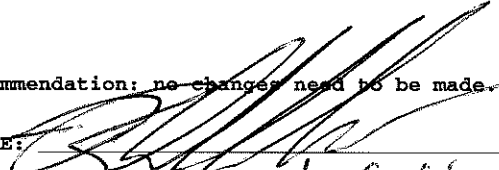
— Don't —

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

DATE:

12-15-06

SIGNATURE:



Please print your name:

Richard Gebhard

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

QC

Dec 06 06 08:23a

Deb Gebhard

949-49 1312

p.1

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1. Describe the portion of the proposed recommendation with which you disagree (e.g. priority date, period of use, source): Purpose and Period of Use -- Quantity is insufficient, see attached Adjudication Claim Report 22-683B. Claimant is entitled to .250 CFS for Irrigation.
2. Describe the changes you wish to make in the proposed recommendation: Claimant requests an additional 0.156 CFS in accordance with IDWR / USFS stipulation.
3. Give a brief explanation as to why you disagree with these portions: Insufficient quantity and not representative of historic use.

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

DATE: 12/11/06

SIGNATURE: Sean R. MoultonPlease print your name: Sean R. Moulton

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

Based on the description of the POU mapped out on attached sheet, it is obvious that Mr. Gebhard owns more of the POU that was devised than 4 ac. Increasing the quantity to the requested amount.

KM