

VH  
STK  
05/11/2001

**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: June 15, 2001**

Water right number: 43-10235

ART WHITAKER  
PO BOX 64  
MALTA ID 83342  
Telephone Number: (208)645-2292

LARENE WHITAKER  
PO BOX 64  
MALTA ID 83342  
Telephone Number: (208)645-2292

**RECEIVED**

**JUN 20 2001**

**Department of Water Resource  
Southern Region**

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: June 15, 2001 SIGNATURE: Art D. Whitaker

Please print your name: ART D WHITAKER

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