

NOTICE OF ERROR
REPLY

RECEIVED
AUG 27 2015
IDWR / NORTH

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: September 30, 2015

Water right number: 94-7643

FLOYD KLEIN
14683 S KLEINS MEDICINE TRAIL
MEDIMONT ID 83842
Telephone Number: (208)689-3431

BEVERLY KLEIN
14683 S KLEINS MEDICINE TRAIL
MEDIMONT ID 83842
Telephone Number: (208)689-3431

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

The priority date needs changed

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

*The dug well @ the original cabin was used
by 1900*

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

*The present house was added later and
water pumped from original well to present dwelling*

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

DATE: 8/21/15

SIGNATURE:

Beverly Klein

Please print your name:

Beverly Klein