

RECEIVED
03/09/2018

MAR 12 2018

DEPARTMENT OF
WATER RESOURCES

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: March 30, 2018

Water right number: 95-14427

DAVID MILLER
4407 E TURK LN
ATHOL ID 83801
Telephone Number: emaildavemiller@yahoo.com

REBECCA MILLER
4407 E TURK LN
ATHOL ID 83801
Telephone Number: emaildavemiller@yahoo.com

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

N/A

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

This is a shared well. It is on my property and I share the well with my neighbor, Jeff Mayo. He is located south of our property.

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

N/A

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

DATE: MARCH 6, 2018 SIGNATURE: David Miller

Please print your name: DAVID MILLER

IDWR Regional Office, 7600 N MINERAL DR STE 100, COEUR D ALENE, ID 83815-7763, (208) 762-2800