

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: November 16, 2018

Water right number: 95-12679

CHRISTOPHER SCISLO
15018 S DOLLIVER RD
COEUR D ALENE ID 83814
Telephone Number: 5099792036

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

QUANTITY OF .01 GPS = 4 GALLONS PER MINUTE
MY WELL PRODUCES 5 GALLONS PER MINUTE

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

CHANGE TO 5 GAL PER MINUTE

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

DOESN'T LINE UP WITH WELL PRODUCTION
NEEDS TO ALIGN WITH OUTPUT.

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

DATE:

10-20-2018

SIGNATURE:

CR: 18

Please print your name:

CHRISTOPHER SCISLO