

RECEIVED  
DEC 20 2006  
DEPT. OF WATER RESOURCES  
SOUTHERN REGION

12/04/2006

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: **ASAP**

Water right number:

37 - 21 677

37 - 21 668

37 - 21 686

37 - 21 695

37 - 21 704

37 - 21 713

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: 19 Dec 2006

SIGNATURE: Katja Casson

Please print your name: Katja Casson

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