

04/12/2021

RECEIVED

APR 27 2021

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: 6/25/2021

Water right number: 87-10946

CRAIG LAVON ROBERTS

PO BOX 663

POTLATCH ID 83855

Telephone Number: (208) 875-1269

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: 4-21-2021 SIGNATURE: Craig L Roberts

Please print your name: Craig L Roberts

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

RECEIVED

APR 27 2021

DEPARTMENT OF
WATER RESOURCES

This is Government Control

Did you pay for my well

No I will use my well
water as I please.

Craig Roberts

^{said}
~~used~~ nothing would come
of this if we signed up,