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6/30/05

Department of Water Resources
Eastern Region

JUN 24 2005

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
NOTICE OF CHANGE IN WATER RIGHT OWNERSHIP

Please print or type. Attach pages with additional information. Instructions are included at the end of this form.
Incomplete forms will be returned.

RECEIVED

1. Please list the water right number(s) and/or adjudication claim number(s) (if any) for each water right to be changed. List just the adjudication claim number if there is no corresponding water right record on file with the department. Indicate, by checking in the space provided (under the "split" heading), if the change in ownership is limited to a portion of a water right in which case division of the existing water right or adjudication claim record will be required.

Water Right No(s).	Adjudication Claim No(s).	Split	Water Right No(s).	Adjudication Claim No(s).	Split
	22-7123.	—			—
		—			—
		—			—
		—			—
		—			—

2. The following **REQUIRED** information must be submitted with this form:

- A. The appropriate **FILING FEE**. See instructions for fee amounts.
- B. A copy of the most recent **DEED, TITLE POLICY, CONTRACT OF SALE** or other legal document indicating your ownership of the property and water right(s) or claim(s) in question, **WITH ATTACHED LEGAL DESCRIPTION**.
- C. Either of the following (if necessary to clarify division of water rights or other complex property descriptions):
PLAT OF PROPERTY or **SURVEY MAP** clearly showing the location of the point(s) of diversion and place of use of your water right(s) and/or adjudication claim(s) (these are usually attached to your deed or on file with the county).

OR

If your water right(s) and/or adjudication claim(s) is for ten or more acres of irrigation, you must submit a USDA Farm Service Agency **AERIAL PHOTO** with the irrigated acres outlined and point(s) of diversion clearly marked. The **AERIAL PHOTO** should be submitted in place of the **PLAT OF PROPERTY** or **SURVEY MAP**.

3. Name and Address of Former Owner/Claimant(s)

Melvin Johnson Strong.

4. New Owner/Claimant(s)

Ida Deane To Deane B. Strong.

Name Connector (Check one): ☐ and, ☐ or, ☐ and/or

New Mailing Address

225 N Hwy 33

City, State and ZIP Code

Driggs ID 83422

New Telephone Number

(208) 354-8210

5. Date you acquired the property

CERTIFICATION OF VITAL RECORD

STATE OF IDAHO
IDAHO DEPARTMENT OF HEALTH AND WELFARE
CENTER FOR VITAL STATISTICS AND HEALTH POLICY

Department of Water Resources
Eastern Region
JUN 24 2005

CERTIFICATE OF DEATH

RECEIVED

DATE FILED: FEBRUARY 01, 1999

STATE FILE NUMBER: 99-00523

DECEDENT: MELVIN JOHNSON STRONG

DATE OF DEATH: JAN. 26, 1999
TIME OF DEATH: 1:30 A.M.

PLACE OF DEATH: DRIGGS, IDAHO

DATE OF BIRTH: MAR. 07, 1945

PLACE OF BIRTH: IDAHO

AGE: 53 YEARS

SEX: MALE

VETERAN? YES

MARITAL STATUS: MARRIED

SPOUSE (MAIDEN): JODEANE BAGLEY

SOCIAL SECURITY NUMBER: 518-52-2924

RESIDENCE: DRIGGS, IDAHO

FATHER: WILLIAM ASTOR STRONG

FATHERS BIRTHPLACE: UTAH

MOTHER (MAIDEN): JUNE ENGBERSON

MOTHERS BIRTHPLACE: IDAHO

MORTUARY: VALLEY MORTUARY

MORTICIAN: SCOTT MCKAGUE

DRIGGS, IDAHO

DISPOSITION: BURIAL

CERTIFYING CORONER: SCOTT MCKAGUE

AUTOPSY: NO

1. CAUSE OF DEATH, UNDERLYING CAUSE LAST:

INTERVAL

CEREBRAL HEMORRHAGE
GUNSHOT WOUND, HEAD

IMMEDIATE

2. OTHER CONDITIONS CONTRIBUTING TO DEATH BUT UNRELATED TO ABOVE CAUSES:

NONE LISTED

MANNER OF DEATH: SUICIDE

DATE OF INJURY: JANUARY 26, 1999

HOUR OF INJURY: 1:30 A.M.

INJURY AT WORK: NO

HOW INJURY OCCURRED: SELF-INFLICTED GUNSHOT WOUND TO THE HEAD

PLACE OF INJURY: AT HOME

LOCATION OF INJURY: 275 N. HWY 33

DRIGGS, IDAHO

JUN - 7 1999

This is a true and correct reproduction of the document officially registered and placed on file with the IDAHO CENTER FOR VITAL STATISTICS AND HEALTH POLICY.

DATE ISSUED: FEBRUARY 02, 1999

This copy is not valid unless prepared on engraved border displaying state seal and signature of the Registrar.

Jane S. Smith
JANE S. SMITH
STATE REGISTRAR



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

Ray W. Rigby
of RIGBY, THATCHER, ANDRUS,
RIGBY & KAM, Chartered
Attorneys at Law
25 North Second East
Rexburg, Idaho 83440
Telephone: 208 356-3633
Idaho State Bar No: 613

RECEIVED
JUN 24 2005
Department of Water Resources
Eastern Region

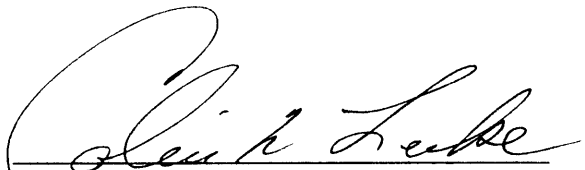
Attorneys for Applicant

IN THE DISTRICT COURT OF THE SEVENTH JUDICIAL DISTRICT OF
THE STATE OF IDAHO IN AND FOR THE COUNTY OF TETON
MAGISTRATE DIVISION

IN THE MATTER OF THE ESTATE OF	)	Case No. <u>SP 99-042</u>
	)	
MELVIN J. STRONG,	)	LETTERS OF
	)	ADMINISTRATION
Deceased.	)	
	)	
	)	

The Court having determined in informal proceedings that Melvin J. Strong died
intestate, JoDeane Bagley Strong, who is duly qualified, is hereby appointed Personal
Representative of the estate of decedent.

WITNESS: Magistrate of the above entitled Court with the seal thereof affixed
this 31st day of August, 1999.

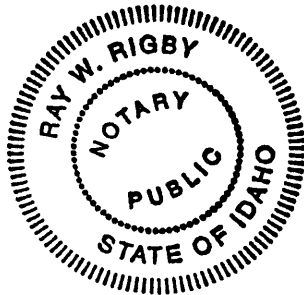

Magistrate

STATE OF IDAHO,)
)
County of Madison.)
SS.

I hereby accept the duties of Personal Representative of the estate of Melvin J. Strong, deceased, and do solemnly swear that I will perform, according to law, the duties of Personal Representative of said estate.

Jo Deane Bagley Strong
Jo Deane Bagley Strong
Personal Representative

SUBSCRIBED AND SWORN To before me this 31st day of August, 1999.



Ray W. Rigby
Notary Public for Idaho
Residing at Rexburg, Idaho
My Commission Expires: 3/12/05

STATE OF IDAHO }
County of Teton } ss.
I HEREBY CERTIFY that the above and foregoing is a full, true and correct copy of the original thereof, on file in my office

Dated 2 Sept 1999
CWB
Magistrate
By Paer
Deputy Clerk