

STATE OF IDAHO

IDAHO DEPARTMENT OF WATER RESOURCES

NOTICE OF CHANGE OF WATER RIGHT OWNERSHIP

Please print or type. Attach pages with additional information. Instructions are on the back of this page.
Incomplete forms will be returned.

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
	Adi 22-13861	OK			

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 rights(s) or claims(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 your water rights(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	<u>Schiess Brothers c/o Lyle Schiess & Ervin Schiess</u> <u>498 W. 675 S., Victor, ID 83455</u>
4. New Owner/Claimant(s)	<u>Scheiss Brothers</u>
New Mailing Address	Name connector (check one): [] and [] or, [] and/or <u>c/o Lyle Schiess, 498 W. 675 S.</u>
City, State and ZIP Code	<u>Victor, ID 83455</u>
New Telephone Number	<u>208-787-2468</u>
5. Date you acquired the property	<u>N/A</u>

RECEIVED
OCT 17 2008

6. If the change in ownership affects the entire water right for each water right or adjudication claim number listed in item 1, THEN SKIP THIS ITEM AND GO TO ITEM 7. If the change in ownership divides the water right(s) among multiple owners, you must describe, in detail, your portion of each water right after the change. Fill in the appropriate spaces in the box(es) below to describe your water right(s) after the change (one water right per box, you may copy this page as necessary). If your quantity of water is greater than a proportionate split, you must attach documentation to show justification for a larger amount. If you are not sure how to identify your portion of the original water right or adjudication claim records, please contact the nearest IDWR office for assistance.

DESCRIPTION OF YOUR PORTION OF WATER RIGHT (If the right(s) will not be split, skip this area and proceed to item 7)		
Water Use	Diversion Rate or Volume (cubic feet per second or acre-feet per annum)	Description (acres, number and type of stock,
Water right and/or Adjudication Claim Number		
Irrigation		
Stock		
Domestic		
Other		
Totals		
Water right and/or Adjudication Claim Number		
Irrigation		
Stock		
Domestic		
Other		
Totals		
Water right and/or Adjudication Claim Number		
Irrigation		
Stock		
Domestic		
Other		
Totals		

For Snake River Basin Adjudication Claims: Please attached a Notice of Appearance completed by your attorney, if you wish IDWR to correspond with him or her for all matters related to your claims.

7. Schiess Bros by Lyle Schiess Lyle Schiess, Partner, for Schiess Brothers
Signature and title (if applicable)

For IDWR Office Use Only

Received by _____ Date _____ Fee _____
 Receipted by _____ Date _____ Receipt No. _____
 Processed by _____ Date _____ WR _____ Date _____

STATE OF IDAHO

IDAHO DEPARTMENT OF WATER RESOURCES

NOTICE OF CHANGE OF WATER RIGHT OWNERSHIP

Please print or type. Attach pages with additional information. Instructions are on the back of this page.
Incomplete forms will be returned.

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
	22-13861	OK			

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 rights(s) or claims(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 your water rights(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	<u>Schiess Brothers c/o Lyle Schiess & Ervin Schiess</u>	
	<u>498 W. 675 S., Victor, ID 83455</u>	
4. New Owner/Claimant(s)	<u>Scheiss Brothers</u>	
	Name connector (check one): ☐ and ☐ or, ☐ and/or	
New Mailing Address	<u>c/o Lyle Schiess, 498 W. 675 S.</u>	
City, State and ZIP Code	<u>Victor, ID 83455</u>	
New Telephone Number	<u>208-787-2468</u>	
5. Date you acquired the property	<u>N/A</u>	

RECEIVED

OCT 09 2008

Department of Water Resources
Eastern Region

6. If the change in ownership affects the entire water right for each water right or adjudication claim number listed in item 1, THEN SKIP THIS ITEM AND GO TO ITEM 7. If the change in ownership divides the water right(s) among multiple owners, you must describe, in detail, your portion of each water right after the change. Fill in the appropriate spaces in the box(es) below to describe your water right(s) after the change (one water right per box, you may copy this page as necessary). If your quantity of water is greater than a proportionate split, you must attach documentation to show justification for a larger amount. If you are not sure how to identify your portion of the original water right or adjudication claim records, please contact the nearest IDWR office for assistance.

DESCRIPTION OF YOUR PORTION OF WATER RIGHT (If the right(s) will not be split, skip this area and proceed to item 7)		
Water Use	Diversion Rate or Volume (cubic feet per second or acre-feet per annum)	Description (acres, number and type of stock,
Water right and/or Adjudication Claim Number		
Irrigation		
Stock		
Domestic		
Other		
Totals		
Water right and/or Adjudication Claim Number		
Irrigation		
Stock		
Domestic		
Other		
Totals		
Water right and/or Adjudication Claim Number		
Irrigation		
Stock		
Domestic		
Other		
Totals		

For Snake River Basin Adjudication Claims: Please attached a Notice of Appearance completed by your attorney, if you wish IDWR to correspond with him or her for all matters related to your claims.

7.

Maquelyn Schiess Personal Representative of Estate of William
Signature and title (if applicable) *E. Schiess (aka Ervin Schiess)*

For IDWR Office Use Only

Received by _____ Date _____ Fee _____
 Receipted by _____ Date _____ Receipt No. _____
 Processed by _____ Date _____ WR _____ Date _____

COOPERATIVE CENTER FOR
HEALTH STATISTICS - VITAL
STATISTICS

450 W. STATE ST.
BOISE, IDAHO 83720

CERTIFICATE OF DEATH

DATE FILED: APRIL 13, 1992

STATE FILE NUMBER: 92-01908

DECEDENT: WILLIAM ERVIN SCHIESS

DATE OF DEATH: APR. 09, 1992 PLACE OF DEATH: VICTOR, IDAHO

DATE OF BIRTH: JUNE 10, 1909 PLACE OF BIRTH: IDAHO

AGE: 82 YEARS SEX: MALE VETERAN? NO

MARITAL STATUS: MARRIED SPOUSE (MAIDEN) : RUBY LAVAUNT MILLER

SOCIAL SECURITY NUMBER: 519-14-4573 RESIDENCE: VICTOR, IDAHO

FATHER: ULRICH SCHIESS, JR.
FATHER'S BIRTHPLACE: SWITZERLAND
MOTHER (MAIDEN): ALICE VICTORIA NIELSEN
MOTHER'S BIRTHPLACE: UTAH

MORTUARY: WADE FUNERAL HOME
MORTICIAN: MARK L. WADE

DRIGGS, IDAHO
DISPOSITION: BURIAL

CERTIFYING PHYSICIAN: LAWRENCE T. CURTIS, MD

AUTOPSY: NO

1. CAUSE OF DEATH, UNDERLYING CAUSE LAST:

INTERVAL

METASTATIC ADENO CARCINOMA LUNG

1 YEARS

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

NONE LISTED

DATE ISSUED: APRIL 15, 1992

*This is to certify that this is a true and correct reproduction of a record of the Idaho State
filed with the Idaho Department of Health & Welfare, Boise, Idaho.*

DO NOT ACCEPT UNLESS ON SUGGESTION OF A PHYSICIAN WITH SIGNATURE OF A PHYSICIAN
DEPT. OF HEALTH & WELFARE, BOISE, IDAHO
Section 35-275, Idaho Code

HWHG135

DEPARTMENT OF HEALTH AND WELFARE

271610

Robert E. Farnam, Esq.
HOLDEN, KIDWELL, HAHN & CRAPO, P.L.L.C.
1000 Riverwalk Drive, Suite 200
P. O. Box 50130
Idaho Falls, Idaho 83405-0130
Telephone: (208) 523-0620
Telefax: (208) 523-9518
Idaho State Bar Number 1240

1:46 AM

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)
)
 WILLIAM E. SCHIESS,)
)
 Deceased.)
)

Case No.: CV 07-231

LETTERS OF ADMINISTRATION

1. Jacquelyn Schiess was duly appointed and qualified as personal representative of the estate of the above named decedent on the 26 day of July, 2007, by the Magistrate acting as Registrar with all authority pertaining thereto.
2. Administration of the estate is unsupervised.
3. These letters are issued to evidence the appointment, qualification, and authority of said personal representative.

WITNESS, my signature and the seal of this court, this 26 day of July, 2007.

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 30 July, 2007

C. W. L.

Magistrate

By

Deputy Clerk

G:\WPD\TETON\14550\Reopen.LA.wpd:jh

/s/ Colin W. Luke

Magistrate