

Received Nov. 5, 2010

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

Notice of Change in Water Right Ownership

1. List the numbers of all water rights and/or adjudication claim records to be changed. If you only acquired a portion of the water right or adjudication claim, check "Yes" in the "Split?" column.

Water Right/Claim No.	Split?	Water Right/Claim No.	Split?	Water Right/Claim No.	Split?
35-10423 PD	Yes ☐ <i>OK completed</i>		Yes ☐		Yes ☐
35-7453B Adj.	Yes ☐ <i>OK</i>		Yes ☐		Yes ☐
35-13254 PD	Yes ☐ <i>OK completed</i>		Yes ☐		Yes ☐
35-7592 Adj.	Yes ☐ <i>OK</i>		Yes ☐		Yes ☐
35-7453A Adj.	Yes ☐ <i>OK</i>		Yes ☐		Yes ☐

2. Previous Owner's Name: George R. Jackson

Name of current water right holder/claimant

3. New Owner(s)/Claimant(s): George R. and D. Glenell Jackson living trust dated May 8, 1996

Name of each new owner as listed on the conveyance document

New owner continued Name connector ☐ and ☐ or ☐ and/or

468 Neff Circle

Mailing address

Blackfoot

ID

83221

City

State

ZIP

(208) 782-2253

dshipley@ida.net

Telephone

Email

4. If the water rights and/or adjudication claims were split, how did the division occur?

- ☐ The water rights or claims were divided as specifically identified in a deed, contract, or other conveyance document.
☐ The water rights or claims were divided proportionately based on the portion of their place(s) of use acquired by the new owner.

5. Date you acquired the water rights and/or claims listed above: May 8, 1996-date trust established

6. This form must be signed and submitted with the following **REQUIRED** items:

- A copy of the conveyance document – warranty deed, quitclaim deed, court decree, contract of sale, etc. The conveyance document must include a legal description of the property or description of the water right(s) if no land is conveyed.
- Plat map, survey map or aerial photograph which clearly shows the place of use and point of diversion for each water right and/or claim listed above (if necessary to clarify division of water rights or complex property descriptions).
- Filing fee (see instructions for further explanation):
 - \$25 per *undivided* water right.
 - \$100 per *split* water right.
 - No fee is required for pending adjudication claims.

7. Signature: D. Glenell Jackson

Signature of new owner/claimant

Trustee
Title, if applicable

10-27-10
Date

Signature: _____

Signature of new owner/claimant

Title, if applicable

Date

For IDWR Office Use Only:

Received by [Signature]

Date

11/5/2010

Receipt No.

E036257

Receipt Amt.

\$50.-

Approved by _____

Processed by _____

Date _____

WARRANTY DEED

446463

For Value Received, **GEORGE R. JACKSON AND D. GLENELL JACKSON,**

Hereinafter called grantor, hereby grants, bargains, sells and conveys unto: **GEORGE R. JACKSON and D. GLENELL JACKSON, Trustees, or their successors in trust, under the GEORGE R. AND D. GLENELL JACKSON LIVING TRUST dated May 8, 1996, and any amendments thereto.**

Hereinafter called the grantee, whose current address is: 1762 W. 800 S.
Pingree, ID 83262

the following described premises, in Bingham County, Idaho, to-wit:

TOWNSHIP 4S, RANGE 33 E.B.M., BINGHAM COUNTY. SECTION 7: LOT 4 AND THE WEST 155 OF THE SE 1/4 SW 1/4.

EXCEPTING RIGHT OF WAY HIGHWAY 39

ALSO EXCEPTING:

BEGINNING AT A POINT 228 FEET SOUTH, OF THE NW CORNER OF LOT 4, AND RUNNING THENCE SOUTH 209'; THENCE EAST 222 FEET; THENCE NORTH 209'; THENCE WEST 222 TO THE POINT OF BEGINNING.

TO HAVE AND TO HOLD the said premises, with their appurtenances unto the said Grantees and to the Grantee's heirs and assigns forever. And the said Grantor does hereby covenant to and with the said Grantee, that the Grantor is the owner in fee simple of said premises; that they are free from all encumbrances except as described above and that Grantor will warrant and defend the same from all lawful claims whatsoever.

DATED: MAY 08 1996

George R. Jackson
GEORGE R. JACKSON

D. Glenell Jackson
D. GLENELL JACKSON

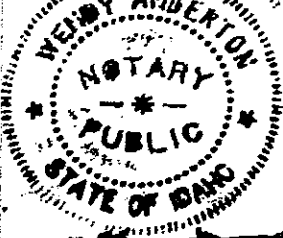
STATE OF IDAHO, COUNTY OF BANNOCK

On this MAY 08 1996 before me, a notary public in and for said State, personally appeared

GEORGE R. JACKSON
D. GLENELL JACKSON

known to me to be the person(s) whose name(s) is/are subscribed to the within instrument, and acknowledged to me that they executed the same.

Wendy Anderson
Notary Public
Residing at 1901 Yarni Court, Idaho
Comm. Expires 12-17-2002



STATE OF IDAHO, COUNTY OF

I hereby certify that this instrument was filed for at the request of

at _____ minutes past _____ o'clock m.
this _____ day of _____

19____, in my office, and duly recorded in Book of Deeds at page _____

Ex-Officio Recorder

By _____ Deputy.

Fees \$ _____
Mail to: _____

446463

RECORDED AT THE REQUEST OF
N. Sherry Anderson
26 AUG - 6 AM 11:24
300
IDAHO COUNTY RECORDS
LELAC/OCT. IDAHO

450159

Hereinafter called grantor, hereby grants, bargains, sells and conveys unto: **GEORGE R. JACKSON and D.GLENELL JACKSON, Trustees**, or their successors in trust, under the **GEORGE R. AND D. GLENELL JACKSON LIVING TRUST** dated May 8, 1996, and any amendments thereto.

the following described premises, in Bingham County, Idaho, to-wit:

Beginning at the South quarter corner of Sec. 7, Twp. 4 South, Range 33 E.B.M. and running thence West 180.7 feet; thence North 193 feet; thence North 50°27' East 560 feet; thence North 25°52' East 322 feet; to the North and South center line of Sec. 7; thence South 1031 feet to the place of beginning.

ORIGINAL COPY TO BE RECORDED
CLASSIFICATION
300
96 DEC 18 PM 12:22
RECORDED AT THE REQUEST OF
MR. GARY ATTENOR

DATED: DEC 8 1996

George R. Jackson
GEORGE R. JACKSON

D. Glenell Jackson
D. GLENELL JACKSON

On this 1996 before
me, a notary public in and for said State, personally
appeared

known to me to be the person(s) whose name(s) is/are subscribed to the within instrument, and acknowledged to me that they executed the same.

Notary Public
Residing at Jerome, Idaho
Comm. Expires 9/29/2001

19 , in my office, and duly recorded in Book of
Deeds at page

Fees \$
Mail to:



450159

WARRANTY DEED

455527

For Value Received, GEORGE R. JACKSON AND D. GLENELL JACKSON,

Hereinafter called grantor, hereby grants, bargains, sells and conveys unto: GEORGE R. JACKSON and D. GLENELL JACKSON, Trustees, or their successors in trust, under the GEORGE R. AND D. GLENELL JACKSON LIVING TRUST dated May 8, 1996, and any amendments thereto.

Hereinafter called the grantee, whose current address is: 1762 West 800 S.
Pingree, Idaho 83262

the following described premises, in Bingham County, Idaho, to-wit:

TOWNSHIP 4S, RANGE 33 E.B.M., BINGHAM COUNTY, SECTION 7: SE 1/4 SE 1/4, SWSE
EXCEPTING THEREFROM THE RIGHT OF WAY FOR STATE HIGHWAY 39.

TO HAVE AND TO HOLD the said premises, with their appurtenances unto the said Grantees and to the Grantee's heirs and assigns forever. And the said Grantor does hereby covenant to and with the said Grantee, that the Grantor is the owner in fee simple of said premises; that they are free from all encumbrances except as described above and that Grantor will warrant and defend the same from all lawful claims whatsoever.

DATED:

455527

George R. Jackson
GEORGE R. JACKSON

D. Glenell Jackson
D. GLENELL JACKSON

STATE OF IDAHO, COUNTY OF Bingham
On this 5 June 97 before Beulah Thompson
me, a notary public in and for said State, personally
appeared

GEORGE R. JACKSON
D. GLENELL JACKSON

known to me to be the person(s) whose name(s)
is/are subscribed to the within instrument, and
acknowledged to me that they executed the
same:

Beulah Thompson
Notary Public

Residing at _____, Idaho
Comm. Expires 4-1-01

KEY BANK OF IDAHO
P. O. Box 760, Blackfoot, ID 83221

STATE OF IDAHO, COUNTY OF _____
I hereby certify that this instrument was filed for
at the request of _____
at _____ minutes past _____ o'clock _____ m.
this _____ day of _____
19 _____, in my office, and duly recorded in Book _____
Deeds at page _____

Ex-Officio Recorder

By _____
Deputy.

Fees \$ _____
Mail to: _____

97 JUL 14 AM 10:01
RECORDED AT THE REQUEST OF

FEE 3.00 DEP 100

14. County Attorney
P.O. Box 1509, Twin Falls, ID
BINGHAM COUNTY RECORDER 83303 -
BLACKFOOT, IDAHO 1509

WARRANTY DEED

450160

For Value Received, GEORGE R. JACKSON AND D. GLENELL JACKSON,

Hereinafter called grantor, hereby grants, bargains, sells and conveys unto: GEORGE R. JACKSON and D. GLENELL JACKSON, Trustees, or their successors in trust, under the GEORGE R. AND D. GLENELL JACKSON LIVING TRUST dated May 8, 1996, and any amendments thereto.

Hereinafter called the grantee, whose current address is: 1762 W. 800 S.
Pineco, ID 83262

the following described premises, in Bingham County, Idaho, to-wit:

Beginning at a point on the South line of Section 7, Township 4, South, Range 33 E.S.M. 160.7 feet West of South quarter corner of said Section 7, and running thence North 193 feet to center line of latter; thence following said center line North 5°27' East 550 feet; thence North 25°54' East 322 feet; to the North and South center line of said Section 7; thence North 259 feet to the NE corner of the SE 1/4 of Section 7; thence West 1132 feet; thence South 80 rods, more or less to the South line of said Section 7; thence East 949.3 feet to the point of beginning, containing 31.05 acres.

TO HAVE AND TO HOLD the said premises, with their appurtenances unto the said Grantees and to the Grantee's heirs and assigns forever. And the said Grantor does hereby covenant to and with the said Grantee, that the Grantor is the owner in fee simple of said premises; that they are free from all encumbrances except as described above and that Grantor will warrant and defend the same from all lawful claims whatsoever.

DATED: DEC 10 1996

George R. Jackson
GEORGE R. JACKSON

D. Glenell Jackson
D. GLENELL JACKSON

STATE OF IDAHO, COUNTY OF BANNOCK
On this 16th day of 1996 before
me, a notary public in and for said State, personally
appeared
GEORGE R. JACKSON
D. GLENELL JACKSON

STATE OF IDAHO, COUNTY OF
I hereby certify that this instrument was filed for
at the request of
at _____ minutes past _____ o'clock _____ m.
this _____ day of _____
19____, in my office, and duly recorded in Book of
Deeds at page _____

known to me to be the person(s) whose name(s)
is/are subscribed to the within instrument, and
acknowledged to me that they executed the
same.

Heather K. Jay
Notary Public
Residing at Jerome, Idaho
Comm. Expires 9/27/2001

Ex-Officio Recorder

By _____ Deputy.
Fees \$
Mail to:

450160



STATE OF IDAHO

CERTIFICATION OF VITAL RECORD

STATE OF IDAHO

DEPARTMENT OF HEALTH AND WELFARE

BUREAU OF VITAL RECORDS AND HEALTH STATISTICS

State of Idaho

CERTIFICATE OF DEATH

ONLY A COPY OF THIS DOCUMENT, CERTIFIED BY THE STATE REGISTRAR WITH THE DEPARTMENT OF HEALTH AND WELFARE, RAISED SEAL, SHALL BE USED AS PROOF OF THIS DEATH UNDER §29-24(1) AND §29-24, IDAHO CODE.

Local Reg. No. 41-c

DECEDENT	1. DECEDENT'S LEGAL NAME (Include AKA's if any) (First, Middle, Last, Suffix) GEORGE RAYMOND JACKSON		2. SEX MALE		3. SOCIAL SECURITY NUMBER 519-01-4701	
	4a. AGE-Last Birthday 94 (Years)		4b. UNDER 1 YEAR Months Days Hours Minutes		5. DATE OF BIRTH (Mo/Day/Yr) 12/01/1915	
PARENTS	7a. RESIDENCE - STATE OR FOREIGN COUNTRY IDAHO		7b. COUNTY BINGHAM		7c. CITY OR TOWN SPRINGFIELD	
	7d. STREET AND NUMBER 1762 W 800 S		7e. APT. NO. 83262		7f. ZIP CODE 83262	
INFORMANT	8. MARITAL STATUS AT TIME OF DEATH ☒ Married ☐ Married, but separated ☐ Widowed ☐ Divorced ☐ Never married ☐ Unknown		9. SURVIVING SPOUSE'S NAME (If wife, give maiden name) DELTA GLENELL TANNER			
	10. EVER IN U.S. ARMED FORCES? ☐ Yes ☒ No		11. BIRTHPLACE (State, Territory, or Foreign Country) WYOMING			
DISPOSITION	12a. FATHER'S NAME (First, Middle, Last, Suffix) JAMES JACKSON		12b. BIRTHPLACE (State, Territory, or Foreign Country) UTAH			
	12c. MOTHER'S MAIDEN NAME (First, Middle, Last, Suffix) ETHEL PEARL CAMERON		13. MAILING ADDRESS (Street and Number, City, State, Zip Code) 1762 W 800 S SPRINGFIELD, ID 83262			
PLACE OF DEATH	13a. INFORMANT'S NAME (Type or print) DELTA GLENELL TANNER		13b. RELATIONSHIP TO DECEDENT WIFE		13c. MAILING ADDRESS (Street and Number, City, State, Zip Code) 1762 W 800 S SPRINGFIELD, ID 83262	
	14. METHOD OF DISPOSITION ☒ Burial ☐ Donation ☐ Removal from Idaho ☐ Other (Specify)		15. PLACE OF DISPOSITION (Name and address of cemetery, crematory, other place) SPRINGFIELD-STERLING CEMETERY		16. NAME AND COMPLETE ADDRESS OF FUNERAL FACILITY HAWKER FUNERAL HOME 132 SOUTH SHILLING AVENUE BLACKFOOT, IDAHO 83221	
DATE OF DEATH	17a. SIGNATURE OF FUNERAL SERVICE LICENSEE OR PERSON ACTING AS SUCH ELECTRONICALLY FILED: PERRY L. HAWKER		17b. LICENSE NUMBER (Of licensee) M0734		18. WAS CORONER CONTACTED DUE TO CAUSE OF DEATH? ☐ Yes ☒ No	
	19a. IF DEATH OCCURRED IN A HOSPITAL: ☐ Inpatient ☐ ER/Outpatient ☐ POA ☐ Hospice facility ☐ Nursing home/Long term care facility ☐ Decedent's home ☐ Other (Specify)		19b. IF DEATH OCCURRED SOMEWHERE OTHER THAN A HOSPITAL: ☐ Facility name (If not facility, give street and number) ☐ City, town, or location of death, and zip code ☐ County of death			
CAUSE OF DEATH	20. FACILITY NAME (If not facility, give street and number) BINGHAM MEMORIAL REHAB & EXTENDED CARE FACILITY		21. CITY, TOWN, OR LOCATION OF DEATH, AND ZIP CODE BLACKFOOT, ID 83221		22. COUNTY OF DEATH BINGHAM	
	23. DATE OF DEATH (Mo/Day/Yr) (Spell month) February 22, 2010		24. TIME OF DEATH 23:00 (24hr)		25. DATE PRONOUNCED DEAD (Mo/Day/Yr) (Spell month) February 22, 2010	
ITEMS 22-28 TO BE USED FOR EXTERNAL CAUSES ONLY (CORONER)	26. TIME PRONOUNCED DEAD 23:00 (24hr)		27. CAUSE OF DEATH			
	PART I. Enter the chain of events - diseases, injuries, or complications - that directly caused the death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE. Enter only one cause on a line: IMMEDIATE CAUSE (Final disease or condition resulting in death) → a. DEHYDRATION DUE TO (or as a consequence of): b. DEMENTIA DUE TO (or as a consequence of): c. DUE TO (or as a consequence of): d. DUE TO (or as a consequence of):		Approximate Interval: Onset to Death 2 WEEKS 6 MONTHS			
CERTIFIER	29. DID TOBACCO USE CONTRIBUTE TO DEATH? ☐ Yes ☐ Probably ☐ No ☒ Unknown		30. IF FEMALE (Aged 10-54): ☐ Not pregnant within past year ☐ Pregnant at time of death ☐ Not pregnant, but pregnant 43 days to 1 year before death ☐ Not pregnant, but pregnant within 42 days of death ☐ Unknown if pregnant within the past year		31. MANNER OF DEATH ☒ Natural ☐ Accident ☐ Suicide ☐ Homicide ☐ Pending investigation ☐ Could not be determined	
	32. DATE OF INJURY (Mo/Day/Yr) (Spell month)		33. TIME OF INJURY (24hr)		34. PLACE OF INJURY (Decedent's home, farm, street, construction site, nursing home, restaurant, forest, etc.)	
REGISTRAR	35. INJURY AT WORK? ☐ Yes ☒ No		36. LOCATION OF INJURY: State _____ City/Town or County _____ Zip Code _____ Street and Number or Location _____ Apartment Number _____			
	37. DESCRIBE HOW INJURY OCCURRED, IF TRANSPORTATION INJURY, STATE THE TYPE(S) OF VEHICLE(S) INVOLVED (Automobile, pickup, motorcycle, ATV, bicycle, etc.) SPECIFY WHICH VEHICLE DECEDENT OCCUPIED, if applicable					
GREAT SEAL OF THE STATE OF IDAHO	TRANSPORTATION INJURY ONLY ☐ Pedestrian ☐ Other (Specify)		38a. WAS DECEDENT: ☐ Driver/Operator ☐ Passenger ☐ What safety devices did decedent use/employ? ☐ Seat belt ☐ Child safety seat ☐ Helmet ☐ Air bag ☐ None ☐ Unknown		39a. CERTIFIER (Check only one, based on official capacity for this certificate) ☒ PHYSICIAN ☐ PHYSICIAN ASSISTANT ☐ ADVANCED PRACTICE PROFESSIONAL NURSE - To the best of my knowledge, death occurred at the time, date, and place, and due to the natural cause(s)/manner stated.	
	39b. CERTIFIER (Check only one, based on official capacity for this certificate) ☐ CORONER - On the basis of examination and/or investigation, in my opinion, death occurred at the time, date, and place, and due to the cause(s) and manner stated.		39c. LICENSE NUMBER O-00222		39d. DATE SIGNED 3 / 1 / 2010 MM DD YYYY	
GREAT SEAL OF THE STATE OF IDAHO	Signature and Title of Certifier THOMAS S. CALL, D.O.		39e. NAME, ADDRESS, AND ZIP CODE OF CERTIFIER (Type or print) THOMAS S. CALL, 98 POPLAR STREET BLACKFOOT, ID 83221			
	40a. REGISTRAR'S SIGNATURE <i>[Signature]</i>		40b. DATE SIGNED 3 / 1 / 2010 MM DD YYYY			

This is a true and correct reproduction of the document officially registered and placed on file with the IDAHO BUREAU OF VITAL RECORDS AND HEALTH STATISTICS.

DATE ISSUED: March 2, 2010

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

JANE S. SMITH
STATE REGISTRAR

