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MAY 06 2019

IDWR/NORTHERN

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?
95-13060	Yes ☐		Yes ☐		Yes ☐
	Yes ☐		Yes ☐		Yes ☐
	Yes ☐		Yes ☐		Yes ☐
	Yes ☐		Yes ☐		Yes ☐
	Yes ☐		Yes ☐		Yes ☐

2. Previous Owner's Name: TILES Wade HORN & BETTY LOU HORN
Name of current water right holder/claimant

3. New Owner(s)/Claimant(s): Wade and Betty Horn Living Trust
New owner(s) as listed on the conveyance document Name connector ☐ and ☐ or ☐ and/or
13292 W. River View Dr. Post Falls ID. 83854
Mailing address City State ZIP
208-755-9186 horntrail@gmail.com
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: 8-15-2013

6. If the water right described herein has been rented from the Water Supply Bank, rental proceeds will be disbursed in the following manner regardless of any arrangements between the buyer(s) and seller(s) to the contrary:

- Rental payments will go to the lessor(s) of record at the beginning of the rental season.
- If a change in ownership is processed by the Department during a rental season, rental payment will be made to the person or entity who is the lessor of record at the beginning of that rental season.
- New lessor(s) of record will receive payment after the following rental season.

7. 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.

8. Signature: Betty L. Horn Trustee 5-4-2019
Signature of new owner/claimant Title, if applicable Date

Signature: _____
Signature of new owner/claimant Title, if applicable Date

For IDWR Office Use Only:

Received by N/A Date N/A Receipt No. N/A Receipt Amt. N/A
Approved by [Signature] Processed by [Signature] Date 5-9-2019

RECORDING REQUESTED BY AND MAIL TO:
Callahan & Associates, Chtd.
PO Box 2226
Coeur d'Alene ID 83816-2226

CLIFFORD T. HAYES 3 P 2435660000
KOOTENAI COUNTY RECORDER
BLB 11/7/2013 1:46 PM
REQ OF CALLAHAN AND ASSOCIATES,
CHTD.
RECORDING FEE: \$16.00 DD
Electronically Recorded

WARRANTY DEED

Re Recorded to Correct Legal Description in # 2428237000.
JILES W. HORN and BETTY L. HORN, husband and wife, do hereby grant, convey and transfer to JILES W. HORN and BETTY L. HORN, TRUSTEE, WADE AND BETTY HORN LIVING TRUST, all of their REAL PROPERTY interest now held or hereafter acquired in the following described real property:

See Exhibit "A" attached hereto and incorporated herein by reference.

To have and hold the said REAL PROPERTY as TRUSTEE. Grantor will warrant and defend the above-described real property against all claims and demands whatsoever, except such rights, easements, covenants, restrictions, health or zoning regulations and assessments as appear of record or use upon the premises. The Grantor of this deed is also the beneficiary of the WADE AND BETTY HORN LIVING TRUST. The address of the grantee is 13292 W Riverview Dr., Post Falls, ID 83854.

Dated this 15 day of Aug., in the year 2013.

Jiles W. Horn
JILES W. HORN

Betty L. Horn
BETTY L. HORN

STATE OF IDAHO
COUNTY OF KOOTENAI

On this 15 day of August, in the year 2013, before me the undersigned Notary Public in and for the State of Idaho, personally appeared JILES W. HORN and BETTY L. HORN, husband and wife, known to me to be the persons whose names are subscribed herein, and acknowledged to me that they executed the same.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal the day and year written above.



[Signature]
Notary Public for Idaho
Comm. Exp.: 11/2/15

All that portion of the Southeast Quarter of the Northeast Quarter of Section 10, Township 50 North, Range 5 West, Boise Meridian, Kootenai County, Idaho, described as follows:

Commencing at the East Quarter corner of said Section 10; thence

North $89^{\circ}47'29''$ West, 934.35 feet along the South line of the Northeast Quarter of Section 10 to the POINT OF BEGINNING; thence

continuing along said South line, North $89^{\circ}47'29''$ West, 281.65 feet; thence

North $0^{\circ}03'$ West, 828.12 feet parallel with the West line of the Northeast Quarter to a point on the South right of way line of the existing County road, East Riverview Drive; thence

Southeasterly, along said right of way line 290.46 feet to a point that bears South $76^{\circ}02'47''$ East, 290.26 feet from the aforesaid point; thence

South $0^{\circ}03'$ East, 759.15 feet parallel with the West line of the Northeast Quarter to the POINT OF BEGINNING.

STATE OF IDAHO
CERTIFICATION OF VITAL RECORD

STATE OF IDAHO
IDAHO DEPARTMENT OF HEALTH AND WELFARE
BUREAU OF VITAL RECORDS AND HEALTH STATISTICS
CERTIFICATE OF DEATH

Date Filed MAY 17, 2018

State File No. 2018-05308

DECEDENT - LEGAL NAME JILES WADE HORN			
SEX MALE	SOCIAL SECURITY NUMBER [REDACTED]	AGE 90 YEARS	DATE OF BIRTH JANUARY 23, 1928
BIRTHPLACE KANSAS CITY, KANSAS		PLACE OF RESIDENCE POST FALLS, IDAHO	
MARITAL STATUS AT TIME OF DEATH MARRIED	NAME OF SURVIVING SPOUSE (If wife, maiden name) BETTY ABRAMSON		WAS DECEDENT EVER IN U.S. ARMED FORCES? YES
FATHER - NAME JILES WADE HORN SR		BIRTHPLACE ARKANSAS	
MOTHER - MAIDEN NAME OLIVE EVANGELINE DUROY		BIRTHPLACE KANSAS	
METHOD OF DISPOSITION BURIAL	FUNERAL SERVICE LICENSEE ANDREW ADAMS		
NAME AND ADDRESS OF FUNERAL FACILITY ENGLISH FUNERAL CHAPEL, INC., POST FALLS, IDAHO			
DATE OF DEATH MAY 15, 2018	TIME OF DEATH 1:01 A.M.	CITY, TOWN OR LOCATION OF DEATH COEUR D'ALENE, IDAHO	COUNTY OF DEATH KOOTENAI
CAUSE OF DEATH (underlying cause last) a. ACUTE METABOLIC ENCEPHALOPATHY			Approximate Interval Between Onset and Death 5 DAYS
b. RESPIRATORY FAILURE			5 DAYS
c. SEPSIS RELATED TO RLL PNEUMONIA			5 DAYS
d. HEART FAILURE RELATED TO ATRIAL FIBRILLATION W/RVR			7 MONTHS
OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH but not resulting in the underlying cause given above C-DIFFICILE; PULMONARY HTN; ACUTE KIDNEY FAILURE; L4 COMPRESSION FRACTURE			WAS AN AUTOPSY PERFORMED? NO
MANNER OF DEATH NATURAL	NAME OF CERTIFIER LISA GRACE MARIE BREISACHER, N.P.		TITLE A.P.R.N.
CORONER SUBSEQUENT CERTIFICATION IF NECESSARY			
EXTERNAL CAUSES ONLY			
DATE OF INJURY	TIME OF INJURY	PLACE OF INJURY	INJURY AT WORK
LOCATION WHERE INJURY OCCURRED			
DESCRIPTION OF HOW INJURY OCCURRED			

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: MAY 17, 2018

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

James B. Aydelotte
JAMES B. AYDELOTTE
STATE REGISTRAR



PRNCO (REV) 11/15

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE



State of Idaho

DEPARTMENT OF WATER RESOURCES

Northern Region • 7600 N Mineral Drive, Suite 100 • Coeur D'Alene ID 83815-7763

Phone: (208) 762-2800 • Fax: (208) 762-2819

Website: idwr.idaho.gov • Email: northerninfo@idwr.idaho.gov

BRAD LITTLE
Governor

GARY SPACKMAN
Director

May 9, 2019

WADE & BETTY HORN LIVING TRUST
13292 W RIVERVIEW DR
POST FALLS ID 83854-5711

Re: Water Right No. 95-13060

Dear Mr. & Mrs. Horn:

Enclosed is a copy of the Notice of Completed Administrative Procedure and associated water right(s) that has been sent to the Coeur d'Alene-Spokane River Basin Adjudication Court, reflecting the ownership change for your water right(s). These documents are now required to be filed by the Department in order to notify the Court of any changes to your water right(s).

This notification to the Court does not affect the previous approval of this water right(s). You will be notified of any future action on your water right(s) by the CSRBA Court or Water Resources.

Please contact this office if you have any questions concerning this notification.

Sincerely,

A handwritten signature in blue ink that reads "Dawn R. Lenon". The signature is fluid and cursive, with the first name "Dawn" being the most prominent.

Dawn R. Lenon
Technical Records Specialist 1