

RECEIVED

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

JUN 30 2022

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. If the water right is leased to the Water Supply Bank, check "Yes". If you are not sure if the water right is leased to the Water Supply Bank, see #7 of the instructions. DE✓

Water Right/Claim No.	Split?	Leased to Water Supply Bank?	Water Right/Claim No.	Split?	Leased to Water Supply Bank?
79-7160 ✓	Yes ☐	Yes ☐		Yes ☐	Yes ☐
	Yes ☐	Yes ☐		Yes ☐	Yes ☐
	Yes ☐	Yes ☐		Yes ☐	Yes ☐
	Yes ☐	Yes ☐		Yes ☐	Yes ☐
	Yes ☐	Yes ☐		Yes ☐	Yes ☐

2. Previous Owner's Name: Evelyn DeWitt

Name of current water right holder/claimant

3. New Owner(s)/Claimant(s): Marlin DeWitt

New owner(s) as listed on the conveyance document

Name connector ☐ and ☐ orMailing address 1618 N. College StCity GrangevilleState ID Zip 83530Telephone 208-451-5723

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: 3-15-2021
6. Do you own the land identified as the water right place of use? Yes ☐ No ☐
 o If no, attach evidence that written notice of the change of water right ownership has been delivered to the landowner of record.
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.
- ☐ If water right(s) are leased to the Water Supply Bank AND there are multiple owners, a Lessor Designation form is required.
- ☐ If water right(s) are leased to the Water Supply Bank, the individual owner or designated lessor must complete, sign and submit an IRS Form W-9.

8. Signature: Marlin DeWitt owner 6-24-2022
 Signature of new owner/claimant Title, if applicable Date
Marlin DeWitt
 Print name

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

 Print name

For IDWR Office Use Only:

Received by Ku Date 6-30-22 Receipt No. C113321 Receipt Amt. 25.00

Active in the Water Supply Bank? Yes ☐ No ☐ If yes, forward to the State Office for processing W-9 received? Yes ☐ No ☒

Name on W-9 _____ Approved by _____ Processed by dj Date 7/27/22

Instrument # 532179

IDAHO COUNTY, IDAHO,

8-31-2021 01:04:31 PM No. of Pages: 4

Recorded for : MATT JESSUP

KATHY M. ACKERMAN

Ex-Officio Recorder Deputy Fee: 15.00

PERSONAL REPRESENTATIVE'S DEED

THIS INDENTURE, made on this 26th day of July, 2021, by and between THE ESTATE OF EVELYN R. DEWITT, Deceased, acting through Verna Lowe, Personal Representative of the Estate, under authority of Idaho County Probate Case CV25-21-0189, of 124 White Bird Road, White Bird, Idaho 83554, hereinafter referred to as the Grantor, and Marlin DeWitt, a single person, of 618 N College St., Grangeville, ID 83530, hereinafter referred to as the Grantee.

WITNESSETH:

That, the Grantor, pursuant to the authority granted to her under the laws of the State of Idaho and in Idaho County, Idaho, aforementioned, and for other good and valuable considerations, pursuant to law does by these presents, grant, bargain, sell and confirm unto the Grantee, in his individual capacity, as his sole and separate property, all right, title and interest, which the decedent had in and to the various parcels of property situate in the County of Idaho, State of Idaho, to wit:

See Exhibit A, attached hereto and incorporated herein by this reference.

TOGETHER WITH, all and singular, the tenements, hereditaments, and appurtenances thereunto belonging or in anywise appertaining, the reversion and reversions, the remainder and remainders, rents, issues, and profits thereof.

TO HAVE AND TO HOLD, all and singular, the said premises with the appurtenances unto the said Grantee, his heirs and assigns, forever.

IN WITNESS WHEREOF, the said Grantor has hereunto set her hand and seal the day and year first above written.

THE ESTATE OF EVELYN R. DEWITT,
Deceased

By

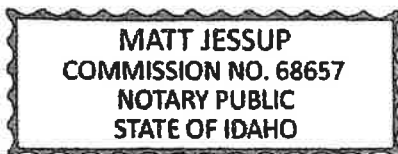
Verna Lowe
VERNA LOWE
Personal Representative

STATE OF IDAHO)
 ss
County of Idaho)

On this 26th day of July, 2021, before me, a Notary Public in and for said County and State, personally appeared Verna Lowe Personal Representative of THE ESTATE OF EVELYN R. DEWITT, Deceased, known or identified to me to be the person whose name is subscribed to the within instrument and acknowledged to me that she freely executed the same for and on behalf of said Estate.

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

(Notary Seal)



Matt Jessup
Notary Public for the State of Idaho,
Residing at Grangeville, therein.
My commission expires 10/25/22.

EXHIBIT A

LEGAL DESCRIPTION FOR VERNA LOWE PARCEL 1

A parcel of land located in the Southeast 1/4 of the Northwest 1/4 of Section 27, Township 27 North, Range 1 East, Boise Meridian, Idaho County, Idaho. Being further described as follows:

BASIS OF BEARING

The West line of the Southeast 1/4 of the Northwest 1/4 of Section 27, Township 27 North, Range 1 East, Boise Meridian, derived from the found BLM monuments and taken as North 00°42'20" East with the distance between monuments found to be 1336.32 feet

BEGINNING on the Centerline of Deer Creek Road from which the Centerwest 1/16 corner as monumented by a BLM Brass Cap bears South 54°14'35" West a distance of 977.45 feet;

Thence along said road Centerline the following three (3) courses:
North 56°42'27" West, a distance of 111.63 feet;

from a tangent which bears North 56°34'15" West, along curve to the right with a radius of 900.00 feet, and having a central angle of 06°59'14" an arc length of 109.76 feet with a chord bearing of North 53°04'37" West, and a chord distance of 109.69 feet.

North 49°35'00" West, a distance of 197.78 feet;

Thence leaving said Centerline, North 26°18'20" East, to a point on the mean Highwater of the Salmon River, a distance of 286.68 feet.

Thence along said mean Highwater Line the following nine (9) courses:

South 57°31'55" East, a distance of 34.89 feet;

North 84°01'41" East, a distance of 53.27 feet;

South 52°59'09" East, a distance of 41.09 feet;

South 55°07'06" East, a distance of 95.38 feet;

South 75°28'59" East, a distance of 37.90 feet;

South 40°37'13" East, a distance of 120.08 feet;

South 48°02'52" East, a distance of 73.43 feet;

CONTINUED

PAGE 1 OF 2

PARCEL 1
VERNA LOWE

South 66°39'54" East, a distance of 93.92 feet;
South 59°16'34" East, a distance of 121.05 feet;

Thence leaving said Mean Highwater, South 64°03'14" West, a distance of 389.46 feet to the
POINT OF BEGINNING.

Said Parcel containing 173,892 square feet or 3.99 acres, more or less and is subject to all
existing easements and rights-of-ways of record or implied.

END OF DESCRIPTION.

Kenneth H. Cook, P.L.S. 9895
Timberline Surveying
847 Park Centre Way, Suite 3
Nampa, Idaho 83651
(208) 465-5687



PAGE 2 OF 2

Markin
Belleville

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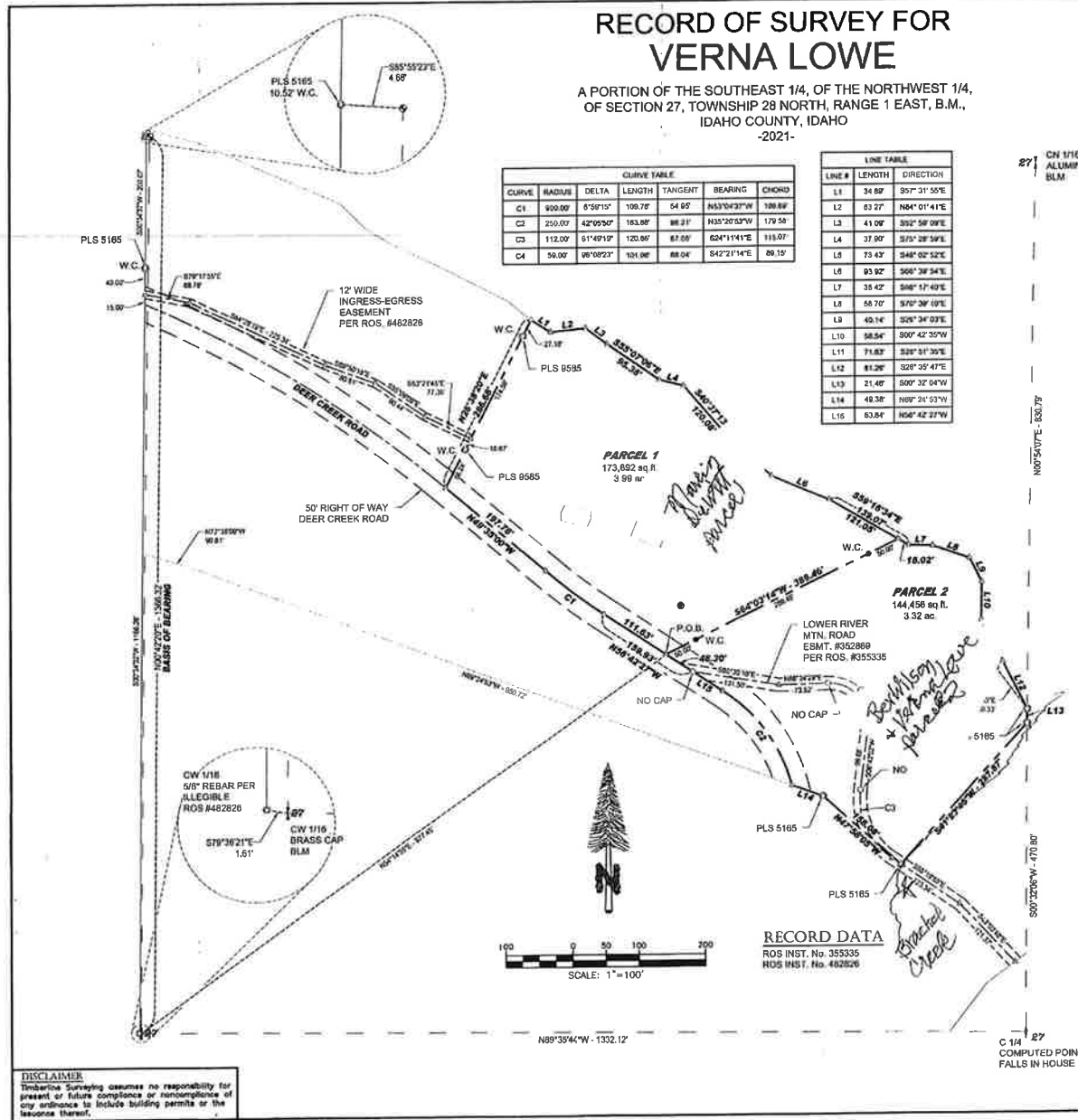


RECORD OF SURVEY FOR VERNA LOWE

A PORTION OF THE SOUTHEAST 1/4, OF THE NORTHWEST 1/4,
OF SECTION 27, TOWNSHIP 28 NORTH, RANGE 1 EAST, B.M.,
IDAHO COUNTY, IDAHO
-2021-

CURVE	RADIUS	DELTA	LENGTH	TANGENT	BEARING	CHORD
C1	900.00	6°59'15"	100.70	64.95	N33°04'37"W	100.69
C2	250.00	42°09'50"	163.80	86.31	N35°20'53"W	179.50
C3	112.00	51°49'19"	120.80	67.00	S24°11'41"E	113.07
C4	50.00	90°00'23"	101.00	88.04	S42°21'14"E	86.19

LINE #	LENGTH	DIRECTION
L1	34.89	S57°31'55"E
L2	63.27	N04°01'41"E
L3	41.06	S92°58'09"E
L4	37.90	S75°28'59"E
L5	73.43	S48°52'52"E
L6	93.92	S66°38'54"E
L7	35.42	S96°17'49"E
L8	58.70	S70°38'09"E
L9	49.14	S26°34'03"E
L10	58.54	S00°42'35"W
L11	71.83	S28°51'30"E
L12	81.26	S28°35'47"E
L13	21.48	S00°32'04"W
L14	48.58	N56°21'53"W
L15	63.84	N06°42'27"W



27 CN 1/16
ALUMINUM CAP
BLM

LEGEND

- 1/4 COR. MONUMENT AS NOTED
- 1/16 COR. MONUMENT AS NOTED
- FOUND 1/2" REBAR AS NOTED
- FOUND 5/8" REBAR AS NOTED
- SET 1/2" REBAR W/ CAP "KHC PLS 0605"
- △ COMPUTED POINT
- P.O.B. POINT OF BEGINNING
- W.C. WITNESS CORNER
- BOUNDARY LINE
- ADJOINER LINE
- SECTION LINE
- EASEMENT LINE
- THE LINE
- CENTER LINE
- RIGHT OF WAY LINE

NARRATIVE:

THIS SURVEY WAS MADE AT THE REQUEST OF VERNIA LOWE. ESTABLISH THE BOUNDARY AS SHOWN. BOUNDARY WAS DEFINED FROM FOUND MONUMENTS OF RECORD. THE WEST LINE OF THE SOUTHEAST 1/4 OF THE NORTHWEST 1/4 HAS DUEL MONUMENTS THIS SURVEY HOLDS THE BLM MONUMENTS FOR THE BASIS OF BEARING HOWEVER THIS SURVEY DOES INFER THAT THE MONUMENTS SET BY PLS 5165 ARE OUT OF POSITION SINCE THE PLS 5165 MONUMENTS PREDATE THE ONES SET BY THE BLM BASIS OF BEARING.

THE WEST LINE OF THE SOUTHEAST 1/4 OF THE NORTHWEST 1/4 OF SECTION 27, TOWNSHIP 28 NORTH, RANGE 1 EAST, BOISE MERIDIAN, TAKEN AS NORTH 00°42'20" EAST AND DISTANCE BETWEEN MONUMENTS FOUND TO BE 1360.32 FEET.

CERTIFICATE:

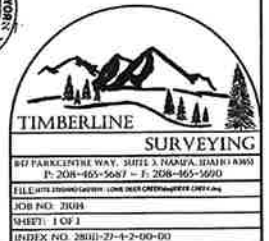
I, KENNETH H. COOK, A PROFESSIONAL LAND SURVEYOR LICENSED BY THE STATE OF IDAHO, CERTIFY THAT:

- THIS PLAT REPRESENTS THE RESULTS OF A SURVEY CONDUCTED UNDER MY DIRECT SUPERVISION AT THE INSTANCE OF THE OWNER.
- THE LANDS SURVEYED LIE WITHIN SECTION 27, TOWNSHIP 28 NORTH, RANGE 1 EAST, BOISE MERIDIAN, AND THE SURVEY WAS COMPLETED ON FEBRUARY 5, 2021.
- THE MONUMENTS DEPICTED ON THE PLAT ARE OF THE CHARACTER SHOWN, AND OCCUPY THE POSITIONS INDICATED AND ARE OF SUFFICIENT NUMBER AND DURABILITY, AND IS IN CONFORMITY WITH THE CORNER PERPETUATION AND FILING ACT, STATE OF IDAHO CODE 55-1601 THROUGH 55-1612.

KENNETH H. COOK



PLS 9895



RECORD DATA
ROS INST. No. 355335
ROS INST. No. 482626

SCALE: 1"=100'

DISCLAIMER
Timberline Surveying assumes no responsibility for present or future compliance or noncompliance of any ordinance to include building permits or the licensee thereof.

(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 MARCH 19, 2021

State File No. 2021-03264

DECEDENT - LEGAL NAME

EVELYN R DEWITT

SEX

FEMALE

SOCIAL SECURITY NUMBER

[REDACTED]

AGE

85 YEARS

DATE OF BIRTH

JUNE 21, 1935

BIRTHPLACE

MONMOUTH, OREGON

PLACE OF RESIDENCE

WHITE BIRD, IDAHO

MARITAL STATUS AT TIME OF DEATH

WIDOWED

NAME OF SURVIVING SPOUSE (if wife, maiden name)

WAS DECEDENT EVER IN U.S. ARMED FORCES?

NO

FATHER - NAME

LAWRENCE WILSON

BIRTHPLACE

MINNESOTA

MOTHER - MAIDEN NAME

EDITH JOHNSON

BIRTHPLACE

OREGON

METHOD OF DISPOSITION

CREMATION

FUNERAL SERVICE LICENSEE

JUSTIN DEFORD

NAME AND ADDRESS OF FUNERAL FACILITY

BLACKMER FUNERAL HOME, GRANGEVILLE, IDAHO

DATE OF DEATH

MAR. 15, 2021

TIME OF DEATH

2:06 P.M.

CITY, TOWN OR LOCATION OF DEATH

WHITE BIRD, IDAHO

COUNTY OF DEATH

IDAHO

CAUSE OF DEATH (underlying cause last)

SQUAMOUS CELL CARCINOMA OF THE NECK

Approximate Interval Between Onset and Death

8 MONTHS

a. DUE TO (or as a consequence of):

c. DUE TO (or as a consequence of):

d. DUE TO (or as a consequence of):

OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH, but not resulting in the underlying cause given above

NONE STATED

WAS AN AUTOPSY PERFORMED?

NO

MANNER OF DEATH

NATURAL

NAME OF CERTIFIER

JACK C. BRUNER, M.D.

TITLE

PHYSICIAN

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.

MARCH 22, 2021

DATE ISSUED:

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

Rev. 3/7/20/20

James B. Aydelotte
JAMES B. AYDELOTTE
STATE REGISTRAR



STATE OF IDAHO

CERTIFICATION OF VITAL RECORD

STATE OF IDAHO

IDAHO DEPARTMENT OF HEALTH AND WELFARE
BUREAU OF VITAL RECORDS AND HEALTH STATISTICS

DATE FILED BY STATE REGISTRAR:

State of Idaho CERTIFICATE OF DEATH

STATE FILE NO: 2014-12019

12/23/2014

ONLY A COPY OF THIS DOCUMENT, CERTIFIED BY THE STATE REGISTRAR WITH THE DEPARTMENT OF HEALTH AND WELFARE, SHOULD BE USED AS PROOF OF DEATH UNDER IDAHO LAW AND IDAHO CIVIL CODE.

Local Reg. No.

DECEASED TYPE OR PRINT IN PERMANENT BLACK INK DO NOT USE FELT TIP PEN FOR INSTRUCTIONS SEE HANDBOOKS PARENTS INFORMANT DISPOSITION PLACE OF DEATH DATE OF DEATH CAUSE OF DEATH ITEM 23-24 TO BE USED FOR MEDICAL CAUSES ONLY CERTIFIER IF DEATH WAS DUE TO OTHER THAN NATURAL CAUSES, THE CORONER MUST COMPLETE AND SIGN THE CERTIFICATE REGISTRAR	1. DECEDENT'S LEGAL NAME (Include AKA's if any) (First, Middle, Last, Suffix) CORNEALOUS S. DEWITT		2. SEX MALE	3. SOCIAL SECURITY NUMBER [REDACTED]
	4a. AGE LAST BIRTHDAY 80 (Years)		4b. UNDER 1 YEAR: Months Days Hours Minutes 4c. UNDER 1 DAY: Hours Minutes	
	5. DATE OF BIRTH (Mo/Day/Yr) 08/19/1934		6. BIRTHPLACE (City and State, Territory, or Foreign Country) BUHL, IDAHO	
	7a. RESIDENCE - STATE OR FOREIGN COUNTRY IDAHO		7b. COUNTY IDAHO	
7c. CITY OR TOWN WHITE BIRD		7d. STREET AND NUMBER 174 PA'S MOUNTAIN ROAD		7e. APT. NO. [REDACTED]
7f. ZIP CODE 83554		7g. INSIDE CITY LIMITS? ☐ Yes ☒ No		
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) EVELYN WILSON				
10. EVER IN U.S. ARMED FORCES? ☐ Yes ☒ No		11a. FATHER'S NAME (First, Middle, Last, Suffix) CHARLES DEWITT		11b. BIRTHPLACE (State, Territory, or Foreign Country) NEVADA
		12a. MOTHER'S MAIDEN NAME (First, Middle, Last, Suffix) CHRISTINE HARRIS		12b. BIRTHPLACE (State, Territory, or Foreign Country) UNKNOWN
13a. INFORMANT'S NAME (Type or print) EVELYN DEWITT		13b. RELATIONSHIP TO DECEDENT WIFE		13c. MAILING ADDRESS (Street and Number, City, State, Zip Code) 174 PA'S MOUNTAIN ROAD WHITE BIRD, ID 83554
14. METHOD OF DISPOSITION ☐ Burial ☒ Cremation ☐ Donation ☐ Entombment ☐ Removal from Idaho ☐ Other (Specify)		15. PLACE OF DISPOSITION (Name and address of cemetery, crematory, other place) VALLEY CREMATORY 920 21ST AVENUE LEWISTON, IDAHO 83501		16. NAME AND COMPLETE ADDRESS OF FUNERAL FACILITY BLACKMER FUNERAL HOME 305 NORTH MILL STREET GRANGEVILLE, IDAHO 83530
17a. SIGNATURE OF FUNERAL SERVICE LICENSEE OR PERSON ACTING AS SUCH ELECTRONICALLY FILED: JEFFREY L. BLACKMER		17b. LICENSE NUMBER (Of license) M0706		18. WAS CORONER CONTACTED DUE TO CAUSE OF DEATH? ☒ Yes ☐ No
19a. IF DEATH OCCURRED IN A HOSPITAL: ☒ Inpatient ☐ Outpatient ☐ DCA ☐ Hospice facility ☐ Nursing home, long term care facility ☐ Decedent's home ☐ Other (Specify)				
19b. IF DEATH OCCURRED SOMEWHERE OTHER THAN A HOSPITAL: ☐ Inpatient ☐ Outpatient ☐ DCA ☐ Hospice facility ☐ Nursing home, long term care facility ☐ Decedent's home ☐ Other (Specify)				
20. FACILITY NAME (If not facility, give street and number) 174 PA'S MOUNTAIN ROAD		21. CITY, TOWN, OR LOCATION OF DEATH, AND ZIP CODE WHITE BIRD, ID 83554		22. COUNTY OF DEATH IDAHO
23. DATE OF DEATH (Mo/Day/Yr) (Spell month) December 19, 2014		24. TIME OF DEATH (24hr) Estimated 04:45 - 04:00		25. DATE PRONOUNCED DEAD (Mo/Day/Yr) (Spell month) December 19, 2014
		26. TIME PRONOUNCED DEAD (24hr) 05:18		
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. PROBABLE ACUTE MYOCARDIAL INFARCTION DUE TO (or as a consequence of): b. CORONARY ARTERY DISEASE DUE TO (or as a consequence of): c. DUE TO (or as a consequence of): d. DUE TO (or as a consequence of):				
PART II. Enter other significant conditions contributing to death, but not resulting in the underlying cause given in Part I. DEMENTIA				
28. DID TOBACCO USE CONTRIBUTE TO DEATH? ☐ Yes ☐ Probably ☒ No ☐ Unknown		29. IF FEMALE (Aged 15-54): ☐ Not pregnant within past year ☐ Not pregnant, but pregnant 43 days to 1 year before death ☐ Pregnant at time of death ☐ Unknown if pregnant within the past year ☐ Not pregnant, but pregnant within 42 days of death		30. WAS AN AUTOPSY PERFORMED? ☐ Yes ☒ No
31. MANNER OF DEATH ☒ Natural ☐ Homicide ☐ Accident ☐ Pending investigation ☐ Suicide ☐ 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, street, etc.) 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. TRANSPORTATION INJURY ONLY ☐ Pedestrian ☐ Other (Specify) _____				
38a. WAS DECEDENT: ☐ Driver/Operator ☐ Passenger ☐ What safety devices(s) did decedent use/employ? ☐ Seat belt ☐ Child safety seat ☐ Helmet ☐ Air bag ☐ None ☐ Unknown				
38b. 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) stated. ☒ 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. Signature and Title of Certifier: ELECTRONICALLY SIGNED: STEVE FREI		38c. LICENSE NUMBER 38d. DATE SIGNED 12 / 23 / 2014 MM DD YYYY		
39a. NAME, ADDRESS, AND ZIP CODE OF CERTIFIER (Type or print) STEVE FREI, 320 WEST MAIN GRANGEVILLE, ID 83530		40a. REGISTRAR'S SIGNATURE James B. Galt		40b. DATE SIGNED 12 / 23 / 2014 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: **DEC 23 2014**

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

JAMES B. AYDELOTTE
STATE REGISTRAR



IDAHO DEPARTMENT OF
WATER RESOURCES

322 E Front Street, Suite 648, Boise ID 83702 • PO Box 83720, Boise ID 83720-0098

Phone: 208-287-4800 • Fax: 208-287-6700 • Email: idwrinfo@idwr.idaho.gov • Website: idwr.idaho.gov

Governor Brad Little

Director Gary Spackman

August 1, 2022

MARLIN DEWITT
618 N COLLEGE ST
GRANGEVILLE ID 83530-1602

Re: Change in Ownership for Water Right No: 79-7160

Dear Water Right Holder:

The Department of Water Resources (Department) acknowledges the receipt of correspondence changing ownership of the above referenced water right to you. The Department has modified its records and has enclosed a computer-generated report for you.

Updating the ownership record for a water right does not reconfirm the validity of the right. When processing a Notice of Change in Water Right Ownership, the Department does not review the history of water use to determine if the right has been forfeited or deliberately abandoned through five years or more of non-use. To read more about water right forfeiture, including how to protect a water right from forfeiture, please see Idaho Code §§ 42-222 and 42-223.

Please note, water right owners are required to report any change of water right ownership and any change of mailing address to the Department within 120 days of the change. Reporting forms are available from any office of the Department or from the Department's website.

If you have any questions concerning the enclosed information, please contact me at (208) 287-4920 or debbi.judd@idwr.idaho.gov.

Sincerely,

Debbi Judd
Technical Records Specialist

Enclosures