

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

RECEIVED

NOV 01 2021

DEPT OF WATER RESOURCES
SOUTHERN REGION

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 #6](#) of the instructions.

Water Right/Claim No.	Split?	Leased to Water Supply Bank?	Water Right/Claim No.	Split?	Leased to Water Supply Bank?
47-4399	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: 1 Genevieve J. or George Loughmiller
Name of current water right holder/claimant
3. New Owner(s)/Claimant(s): Jana or Shawn Walker
New owner(s) as listed on the conveyance document Name connector ☐ and ☒ or ☐ and/or
- 2485E 2500 N Twin Falls ID 83301
Mailing address City State ZIP
- 208 403 6778 two-dragoons @ yahoo.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: 3
6. If the water right is leased to the Water Supply Bank changing ownership of a water right will reassign to the new owner any Water Supply Bank leases associated with the water right. Payment of revenue generated from any rental of a leased water right requires a completed [IRS Form W-9](#) for payment to be issued to an owner. A new owner for a water right under lease shall supply a W-9. Water rights with multiple owners must specify a designated lessor, using a completed [Lessor Designation](#) form. Beginning in the calendar year following an acknowledged change in water right ownership, compensation for any rental will go to the new owner(s).
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):
 o \$25 per *undivided* water right.
 o \$100 per *split* water right.
 o 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: Jana Walker Title, if applicable: _____ Date: 10/1/2021
 Signature: Shawn Walker Title, if applicable: _____ Date: 10/1/2021
 Signature of new owner/claimant Signature of new owner/claimant

For IDWR Office Use Only:

Received by: SG Date: 11/1/21 Receipt No. 5038907 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 KA Date 11-3-21

TWIN FALLS COUNTY

Recorded for:

GENEVIEVE I LOUGHMILLE

11:52:17 AM 03-22-2018

2018-004317

No. Pages: 1 Fee: \$ 15.00

KRISTINA GLASCOCK

County Clerk

Deputy: BHUNTER

QUITCLAIM DEED

RECEIVED
NOV 01 2021
DEPT OF WATER RESOURCES
SOUTHERN REGION

For Value

Received,

Genevieve I Loughmiller

do(es) hereby convey, release, remise, and forever quit claim unto

Jana I Walker

whose address is

2485 E 2500N

herein after called the Grantee, the following described premises situated in Twin Falls County,

Idaho, to-wit:

East half of the Southeast Quarter
of the south east Quarter section 22

Legal Description:

township twelve south, Range 16 East
of the Boise meridian

together with its appurtenances.

Dated:

March 22 2018

Genevieve I Loughmiller

Signature

Signature

STATE OF Idaho

)
ss.

COUNTY OF

Twin Falls

On this March 22, 2018, (date) before me, a Notary Public in and for said

State, personally appeared GENEVIEVE I Loughmiller
known or identified to me to be the person(s) whose name(s) subscribed to the within instrument, and
acknowledged to me that he/she/they executed the same.



Sharon Lancaster

Notary Public of Idaho

Residing at: Twin Falls, ID

Commission Expires: 5-26-2019

TWIN FALLS COUNTY

Recorded for:

GENEVIEVE I LOUGHMILLE

11:52:15 AM 03-22-2018

2018-004316

No. Pages: 1 Fee: \$ 15.00

KRISTINA GLASCOCK

County Clerk

Deputy: **BHUNTER**

QUITCLAIM DEED

For Value

Received, Genevieve I Loughmiller

do(es) hereby convey, release, remise, and forever quit claim unto

Shawn and Jana Walker husband and wife

whose address is 2485 E 2500N Twin Falls Id 83301

herein after called the Grantee, the following described premises situated in Twin Falls County,

Idaho, to-wit:

Legal Description: West half of the Southeast Quarter

of the South East Quarter section (22), township 40
together with its appurtenances. twelve South, Range 16 East of the

Dated: March 22 2018 Bosie Meridian,

Genevieve I Loughmiller
Signature

Signature

STATE OF Idaho)

ss.

COUNTY OF Twin Falls)

On this March 22, 2018 (date) before me, a Notary Public in and for said State, personally appeared GENEVIEVE I Loughmiller known or identified to me to be the person(s) whose name(s) subscribed to the within instrument, and acknowledged to me that he/she/they executed the same.



Sharon Lancaster

Notary Public of Idaho

Residing at Twin Falls, ID

Commission Expires: 5-26-2019

KRISTINA GLASCOCK

County Clerk

Deputy: CKULIK

GENERAL POWER OF ATTORNEY

BE IT KNOWN, that Genevieve Isabelle Loughmiller has
 Made and appointed, and by these presents does make and appoint
John R. L. Loughmiller true and lawful
 attorney for him/her and in his/her name, place and stead,
 giving and granting to said attorney, general, full and
 unlimited power and authority to do and perform all and every
 act and thing whatsoever requisite necessary to be done in and
 about the premises as fully, to all intents and purposes, as
 could be done if personally present, with full power of
 substitution and revocation, hereby ratifying and confirming all
 that said attorney shall lawfully do or cause to be done by
 virtue hereof.

IN WITNESS WHEREOF, I have hereunto set my hand and seal
 this 7th day of Dec, 2015.

Signed, sealed and delivered in the presence of:

 Witness

Isabelle Loughmiller

 Witness

State of Idaho)
) ss.
 County of Twin Falls)

The foregoing instrument was acknowledged by me this 7th
 day of December, 2015 by: Genevieve Isabelle Loughmiller
 who is/are personally known by me or who has/have produced:
ID card as identification and who did not take an
 oath.



Rebecca Hunter

Notary Public

State of Idaho

My Commission Expires: 02-01-2019

Residing: Twin Falls, Idaho 83301

CERTIFICATION OF VITAL RECORD

STATE OF IDAHO

IDAHO DEPARTMENT OF HEALTH AND WELFARE
COOPERATIVE CENTER FOR HEALTH STATISTICS

CERTIFICATE OF DEATH

DATE FILED: MAY 23, 1994

STATE FILE NUMBER: 94-02990

DECEDENT: GEORGE THAINE LOUGHMILLER

DATE OF DEATH: MAY 11, 1994 PLACE OF DEATH: TWIN FALLS, IDAHO

DATE OF BIRTH: AUG. 09, 1923 PLACE OF BIRTH: KANSAS

AGE: 70 YEARS SEX: MALE VETERAN? NO

MARITAL STATUS: MARRIED SPOUSE (MAIDEN): GENEVIEVE I. COURTNEY

SOCIAL SECURITY NUMBER: RESIDENCE: TWIN FALLS, IDAHO

FATHER: WILLIE ANDREW LOUGHMILLER

FATHERS BIRTHPLACE: KANSAS

MOTHER (MAIDEN): MARTHA IDONIA FLANDERS

MOTHERS BIRTHPLACE: KANSAS

MORTUARY: WHITE MORTUARY, INC.

MORTICIAN: JERRY D. HOLMAN

TWIN FALLS, IDAHO

DISPOSITION: BURIAL

CERTIFYING PHYSICIAN: PATRICK P. DESMOND, MD

AUTOPSY: NO

1. CAUSE OF DEATH, UNDERLYING CAUSE LAST:

INTERVAL

ACUTE RENAL FAILURE

5 WEEKS

CHRONIC LYMPHOCYTIC LEUKEMIA

10 YEARS

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

NONE LISTED

I certify that this is a true and correct reproduction or abstract of an official
record filed with the IDAHO COOPERATIVE CENTER FOR HEALTH STATISTICS.

MAY 25, 1994

DATE ISSUED:

JANE S. SMITH
State Registrar



IDAHO DEPARTMENT OF
WATER RESOURCES

Southern Region • 650 Addison Ave W, Suite 500 • Twin Falls, ID 83301-5858

Phone: 208-736-3033 • Fax: 208-736-3037 • Email: southerninfo@idwr.idaho.gov • Web: idwr.idaho.gov

Governor Brad Little

Director Gary Spackman

November 03, 2021

SHAWN AND JANA WALKER
2485 E 2500 N
TWIN FALLS ID 83301-0648

Re: Change in Ownership for Water Right No(s): 47-4399

Dear Water Right Holder(s):

The Department of Water Resources (Department) acknowledges the receipt of correspondence changing ownership of the above referenced water right(s) 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) 736-3033.

Sincerely,

Kent Aasa
Water Resource Agent, Senior

Enclosure(s)