

RECEIVED

JAN 21 2021

RECEIVED

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCESWATER RESOURCES
WESTERN REGION

JAN 25 2021

Notice of Change in Water Right Ownership

DEP 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 of 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?
37-8099	Yes ☐	Yes ☐		Yes ☐	Yes ☐
37-13335	Yes ☐	Yes ☐		Yes ☐	Yes ☐
37-13336	Yes ☐	Yes ☐		Yes ☐	Yes ☐
	Yes ☐	Yes ☐		Yes ☐	Yes ☐
	Yes ☐	Yes ☐		Yes ☐	Yes ☐

2. Previous Owner's Name: Elizabeth M Powers
Name of current water right holder/claimant

3. New Owner(s)/Claimant(s): Sean, Andrea Powers
New owner(s) as listed on the conveyance document Name connector ☒ and ☐ or ☐ and/or

7561 East 101 Ranch Loop Road King Hill Idaho 83633
Mailing address City State ZIP

(208) 590-1325 Sap movies 1 @ 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: November 19 2020

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):
- ☐ \$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: Sean Powers owner 01-20-21
Signature of new owner/claimant Title, if applicable Date

Signature: Andrea Powers owner 01-20-21
Signature of new owner/claimant Title, if applicable Date

For IDWR Office Use Only:

Received by AS Date 01/21/2021 Receipt No. W049035 Receipt Amt. \$75⁰⁰

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 AS Date 2-25-21

SUPPORT DATA

IN FILE # 37-8099

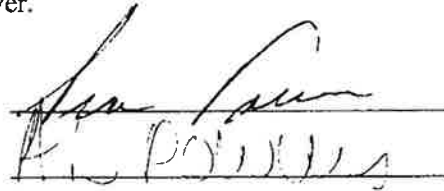
Instrument # 485406 # Pages: 2
ELMORE COUNTY, Idaho
Nov 09, 2020 1:32:54 pm Fee: \$ 15.00
For: POWERS, SEAN
SHELLEY ESSL, Recorder
JULIE, Deputy

QUITCLAIM DEED

FOR VALUE RECEIVED, Made this **16th day of October, 2020**, between
Sean Maloney Powers, a married man and Audra L Powers, his wife as Grantor(s)
and Sean Maloney Powers and Audra L Powers, husband and wife, as community property with
right of survivorship as Grantee(s)
whose current address is: 7561 E 1010 Ranch Road, King Hill, Idaho 83633
HEREINAFTER GRANTOR DOES RELEASE AND FOREVER QUITCLAIM UNTO
GRANTEE, and to their heirs and assigns all right, title and interest in that certain lot, piece or
parcel of land, situate, lying and being in, County of **Elmore**, State of Idaho, particularly
described as follows, to wit:

See Exhibit "A" attached hereto and made a part hereof.

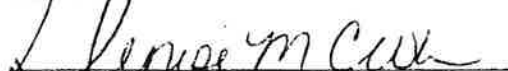
TO HAVE AND TO HOLD, All and singular the said premises, together with the appurtenances,
unto the Grantee(s) and their heirs and assigns forever.



State of Idaho
County of Elmore

On this _____ day of October, 2020, before me, the undersigned, a Notary Public, in and for
said State, personally appeared, SEAN MALONEY POWERS AND AUDRA L POWERS,
KNOWN to me, and/or identified to me on the basis of satisfactory evidence, to be the person(s)
whose name(s) is/are subscribed to the within instrument and acknowledged to me that
they/he/she executed the same.

WITNESS MY HAND AND OFFICIAL SEAL


Notary Public
Residing at: Mountain Home, ID
Commission Expires: 10/10/2025

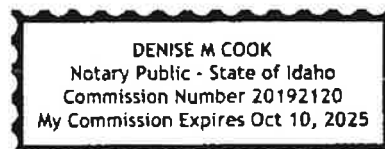


EXHIBIT A

Township 5 South, Range 11 East, Boise Meridian, Elmore County, Idaho

Section 9: E $\frac{1}{2}$ SE $\frac{1}{4}$

Section 10: SW $\frac{1}{4}$ SW $\frac{1}{4}$, SE $\frac{1}{4}$ SW $\frac{1}{4}$

SW $\frac{1}{4}$ SE $\frac{1}{4}$ SAVE AND EXCEPT a portion of the SW $\frac{1}{4}$ SE $\frac{1}{4}$, described as follows:

Commencing at the Southeast Corner, Section 10, Township 5 South, Range 11 East, B.M.; thence North 0°05'22" East 1318.68 feet along the east boundary of said Section 10; thence North 89°47'10" West 1319.36 feet to the Northeast corner of the SW $\frac{1}{4}$ SE $\frac{1}{4}$ of said Section 10, said point being the Real Point of Beginning; thence North 89°47'10" West 330.00 feet along the northerly boundary South 0°11'14" West 660.00 feet along a line parallel to the easterly boundary of the SW $\frac{1}{4}$ SE $\frac{1}{4}$ of said Section 10; thence South 89°47'10" East 330.00 feet along a line parallel to the northerly boundary of the SW $\frac{1}{4}$ SE $\frac{1}{4}$ of said Section 10; then North 0°11'14" East 660.00 feet along the easterly boundary of the SW $\frac{1}{4}$ SE $\frac{1}{4}$ of said Section 10 to the Real Point of Beginning.

Section 15: E $\frac{1}{2}$ NW $\frac{1}{4}$, SW $\frac{1}{4}$ NW $\frac{1}{4}$, SAVE AND EXCEPT a parcel of land located in the NW $\frac{1}{4}$ Section 15, T5S, R11E, B.M., Elmore County, Idaho more particularly described as follows:

Beginning at the Southwest Corner of said NW $\frac{1}{4}$, also being the Real Point of Beginning; thence along the Westerly boundary of said NW $\frac{1}{4}$ N 00°18'00" W 683.12 feet; thence S 45°44'17" E 983.83 feet to a point on the southerly boundary of said NW $\frac{1}{4}$; thence along the southerly boundary of said NW $\frac{1}{4}$ N89°42'36" W 701.01 feet to the Real Point of Beginning.

Instrument # 0000482836
ELMORE COUNTY, ID
11:36:25 AM Aug 12, 2020
For ALLIANCE TITLE - BOISE PRODU
No. of Pages: 3 Fee: \$15.00
SHELLEY ESSL, Recorder
DE, Deputy
Electronically Recorded by Simplifile

Recording Requested By and
When Recorded Return to:

John McGown, Jr.
Hawley Troxell Ennis & Hawley LLP
877 Main Street, Suite 1000
Boise, ID 83702

ACCOMMODATION

SPACE ABOVE THIS LINE FOR RECORDER'S USE ONLY

GRANT DEED

THIS GRANT DEED is made this 4 day of August, 2020, by Elizabeth M. Powers, a widow ("**Grantor**") and Sean Maloney Powers, a married man, as his sole and separate property ("**Grantee**"), whose address is 7561 E. 1010 Ranch Road, King Hill, Idaho 83633.

WITNESSETH:

FOR VALUE RECEIVED, GRANTOR does hereby grant, sell and convey to GRANTEE and to his successors and assigns forever, all that certain real property located in Elmore County, State of Idaho, more particularly described as:

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

TOGETHER WITH all and singular the buildings and improvements thereon, if any, water and water rights thereto, if any, and any rights of way, easements, tenements, hereditaments and appurtenances thereunto belonging or in anywise appertaining, the reversion and reversions, and the remainder and remainders thereof and the rents, issues and profits thereof (collectively the "**Premises**").

TO HAVE AND TO HOLD all and singular the above-described Premises, together with the appurtenances unto GRANTEE, and to his successors and assigns forever.

Grantor makes no covenants or warranties with respect to title to the Premises, express or implied, other than (i) that previous to the date of this instrument, Grantor has not conveyed the same estate or any right, title or interest therein to any person other than Grantee and (ii) Grantor hereby covenants with Grantee that the Premises at the execution of this instrument are free from all encumbrances done, made or suffered by Grantor or any person claiming under Grantor, SUBJECT TO (a) reservations or restrictions in federal patents or state deeds or in laws providing for such patents or

deeds, and (b) to all easements, restrictions, agreements or other matters of record or appearing from a survey or inspection of the Premises.

IN WITNESS WHEREOF, GRANTOR has hereunto executed this Grant Deed as of the day and year first above written.

GRANTOR:

Elizabeth M. Powers
Elizabeth M. Powers

STATE OF IDAHO)
) ss.
County of Ada)

On this 4th day of August, 2020, before me,
Monica L. Vail, a Notary Public in and for said state,
personally appeared Elizabeth M. Powers, known or identified to me to be the person
whose name is subscribed to the foregoing instrument, and acknowledged to me that
she executed the same.

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



Monica L. Vail
Notary Public for Idaho
Residing at Meridian, ID
My commission expires April 9, 2025

EXHIBIT A

Township 5 South, Range 11 East, Boise Meridian, Elmore County, Idaho

Section 9: E $\frac{1}{2}$ SE $\frac{1}{4}$

Section 10: SW $\frac{1}{4}$ SW $\frac{1}{4}$, SE $\frac{1}{4}$ SW $\frac{1}{4}$

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Instrument # 0000482684
ELMORE COUNTY, ID
10:28:59 AM Aug 07, 2020
For ALLIANCE TITLE - BOISE PRODUCE
No. of Pages: 3 Fee: \$15.00
SHELLEY ESSL, Recorder
DE, Deputy
Electronically Recorded by Simplifile

Recording Requested By and
When Recorded Return to:

John McGown, Jr.
Hawley Troxell Ennis & Hawley LLP
877 Main Street, Suite 1000
Boise, ID 83702

ELECTRONICALLY RECORDED - DO NOT
REMOVE THE COUNTY STAMPED FIRST
PAGE AS IT IS NOW INCORPORATED AS
PART OF THE ORIGINAL DOCUMENT.

ACCOMMODATION

SPACE ABOVE THIS LINE FOR RECORDER'S USE ONLY

GRANT DEED

THIS GRANT DEED is made this 4 day of August, 2020, by Elizabeth M. Powers, as Trustee of The Jack Powers and Betty Powers Family Trust - Trust A, as established under agreement dated January 13, 1997 ("Grantor") and Elizabeth M. Powers, a widow ("Grantee"), whose address is 3154 S. Crabapple Lane, Boise, ID 83706.

WITNESSETH:

FOR VALUE RECEIVED, GRANTOR does hereby grant, sell and convey to GRANTEE and to her successors and assigns forever, all that certain real property located in Elmore County, State of Idaho, more particularly described as:

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

TOGETHER WITH all and singular the buildings and improvements thereon, if any, water and water rights thereto, if any, and any rights of way, easements, tenements, hereditaments and appurtenances thereunto belonging or in anywise appertaining, the reversion and reversions, and the remainder and remainders thereof and the rents, issues and profits thereof (collectively the "Premises").

TO HAVE AND TO HOLD all and singular the above-described Premises, together with the appurtenances unto GRANTEE, and to her successors and assigns forever.

[SIGNATURE ON FOLLOWING PAGE]



Recording Requested By and
When Recorded Return to:

John McGown, Jr.
Hawley Troxell Ennis & Hawley LLP
877 Main Street, Suite 1000
Boise, ID 83702

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TO HAVE AND TO HOLD all and singular the above-described Premises, together with the appurtenances unto GRANTEE, and to her successors and assigns forever.

[SIGNATURE ON FOLLOWING PAGE]

IN WITNESS WHEREOF, GRANTOR has hereunto executed this Grant Deed as of the day and year first above written.

GRANTOR:

The Jack Powers and Betty Powers
Family Trust - Trust A

By: Elizabeth M. Powers
Elizabeth M. Powers, Trustee

STATE OF IDAHO)
) ss.
County of Ada)

On this 4th day of August, 2020, before me,
Monica L. Vail, a Notary Public in and for said State,
personally appeared Elizabeth M. Powers, known or identified to me to be the person
whose name is subscribed to the within instrument as Trustee of The Jack Powers and
Betty Powers Family Trust - Trust A, and acknowledged to me that she executed the
same as such Trustee.

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



Monica L. Vail
Notary Public for Idaho
Residing at Mendocino, ID
My commission expires April 2, 2025

EXHIBIT A

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

SEP 19 2002

State of Idaho
CERTIFICATE OF DEATH

State File No. **6705**
Local Reg. No. _____

PRINT A COPY OF THIS DOCUMENT, CERTIFIED BY THE STATE REGISTRAR, WITH THE DEPT. OF HEALTH & WELFARE RAISED SEAL, SHALL BE USED AS FINAL EVIDENCE OF THIS DEATH UNDER IDAHO CODE 39-2401 & 39-274

TYPE OR PRINT IN PERMANENT BLACK INK DO NOT USE FELT TIP PEN	DECEDENT - NAME FIRST FRANKLIN MIDDLE JACK LAST POWERS		SEX Male	DATE OF DEATH (Month, Day, Year) September 16, 2002
	SOCIAL SECURITY NUMBER _____		AGE - Last Birthday (Yrs.) 73	DATE OF BIRTH (Month, Day, Year) October 3, 1928
	WAS DECEDENT EVER IN U.S. ARMED FORCES? ☒ Yes ☐ No		PLACE OF DEATH (Check only one) (1) ☐ Inpatient (2) ☐ ER/Outpatient (3) ☐ DOA (4) ☒ Long-Term Care Facility (5) ☐ Own Residence (6) ☐ Other Private Residence (7) ☐ Other (Specify) _____	
	FACILITY NAME AND ADDRESS (If not a hospital, enter name of place, street and number) * Idaho State Veterans Home 320 Collins Road		CITY, TOWN OR LOCATION OF DEATH Boise	
NAME OF DECEDENT: For use by physician or institution	MARITAL STATUS - Married, Never Married, Widowed, Divorced (Specify) Married		SURVIVING SPOUSE (If wife, give maiden name) Elizabeth Maloney	
	DECEDENT'S USUAL OCCUPATION (Give kind of work done during most of working life. Do not use retired.) Rancher		KIND OF BUSINESS / INDUSTRY Livestock	
	RESIDENCE STATE Idaho	COUNTY Ada	CITY, TOWN OR LOCATION Boise	STREET AND NUMBER 3154 S. Crabapple Lane
	INSIDE CITY LIMITS? ☒ Yes ☐ No		WAS DECEDENT OF HISPANIC ORIGIN? (Specify No or Yes - if yes, specify Cuban, Mexican, Puerto Rican, etc.) ☐ Yes ☒ No	
PARENTS	FATHER - NAME Harold J. Powers		BIRTHPLACE Eagleville, California	
	MOTHER - FULL MAIDEN NAME Marie Street		BIRTHPLACE Lake City, California	
	INFORMANT Elizabeth Powers		MAILING ADDRESS (Street and Number or Rural Route Number, City or Town, State, Zip Code) 3154 S. Crabapple Lane, Boise, Idaho 83706	
	METHOD OF DISPOSITION ☒ Burial ☐ Cremation ☐ Removal from Idaho		PLACE OF DISPOSITION (Name of cemetery, crematory, or other place) Glenn Rest Cemetery	
DISPOSITION	SIGNATURE OF FUNERAL SERVICE LICENSEE OR PERSON ACTING AS SUCH 		NAME AND ADDRESS OF FACILITY Summers Funeral Homes, Boise Chapel 1205 W. Bannock, Boise, Idaho 83702	
	TIME OF DEATH 11:40 P.		DATE PRONOUNCED DEAD (Month, Day, Year) September 16, 2002	
	WAS CASE REFERRED TO CORONER? ☐ Yes ☒ No		MANNER OF DEATH (Check One) ☒ Natural ☐ Homicide ☐ Suicide ☐ Accident-Determined	
	27. PART I. Enter the diseases, injuries, or complications that caused the death. Do not enter the mode of dying, such as cardiac or respiratory arrest, shock, or heart failure. List only one cause on each line. IMMEDIATE CAUSE (Final disease or condition resulting in death) a. Pneumonia DUE TO (or as a consequence of): b. _____ c. _____ d. _____		Approximate Interval Between Onset and Death 10 days	
CAUSE OF DEATH	27. PART II. Other Significant Conditions contributing to death but not resulting in the underlying cause given in Part I. Parkinson's Disease, Coronary Artery Disease		WAS AN AUTOPSY PERFORMED? ☐ Yes ☒ No	
	CERTIFIER (Check only one) ☒ PHYSICIAN - To the best of my knowledge, death occurred at the time, date, and place, and due to the cause(s) and manner as 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 as stated.		WERE AUTOPSY FINDINGS AVAILABLE PRIOR TO COMPLETION OF CAUSE OF DEATH? ☐ Yes ☐ No	
	SIGNATURE AND TITLE OF CERTIFIER 		LICENSE NUMBER M5967	
	NAME AND ADDRESS OF CERTIFIER (Type/print) Robert F. Smith, M.D., 320 Collins Road, Boise, Idaho 83702 phone #334-5000		DATE SIGNED (Month, Day, Year) 9/18/02	
TO BE USED FOR EXTERNAL CAUSES ONLY	DATE OF INJURY (Mo, Day, Yr) _____		HOUR OF INJURY _____	
	DESCRIBE HOW INJURY OCCURRED _____		PLACE OF INJURY - At home, farm, street, factory, office building, etc. (Specify) _____	
	INJURY AT WORK? ☐ Yes ☐ No		IF TRANSPORTATION ACCIDENT, Specify ☐ Driver ☐ Passenger ☐ Pedestrian ☐ Other _____	
	CORONER'S ACTION ☒ I have reviewed and/or amended, and certified.		CORONER'S SIGNATURE _____	
CORONER'S REVIEW AREA	REGISTRAR'S SIGNATURE 		DATE FILED (Month, Day, Year) SEP 19 2002	
	REGISTRAR Sue Clark			

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.

SEP 19 2002

DATE ISSUED: _____

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

JANE S. SMITH
STATE REGISTRAR

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

Elmore County, Idaho

clover creek - upper 5M

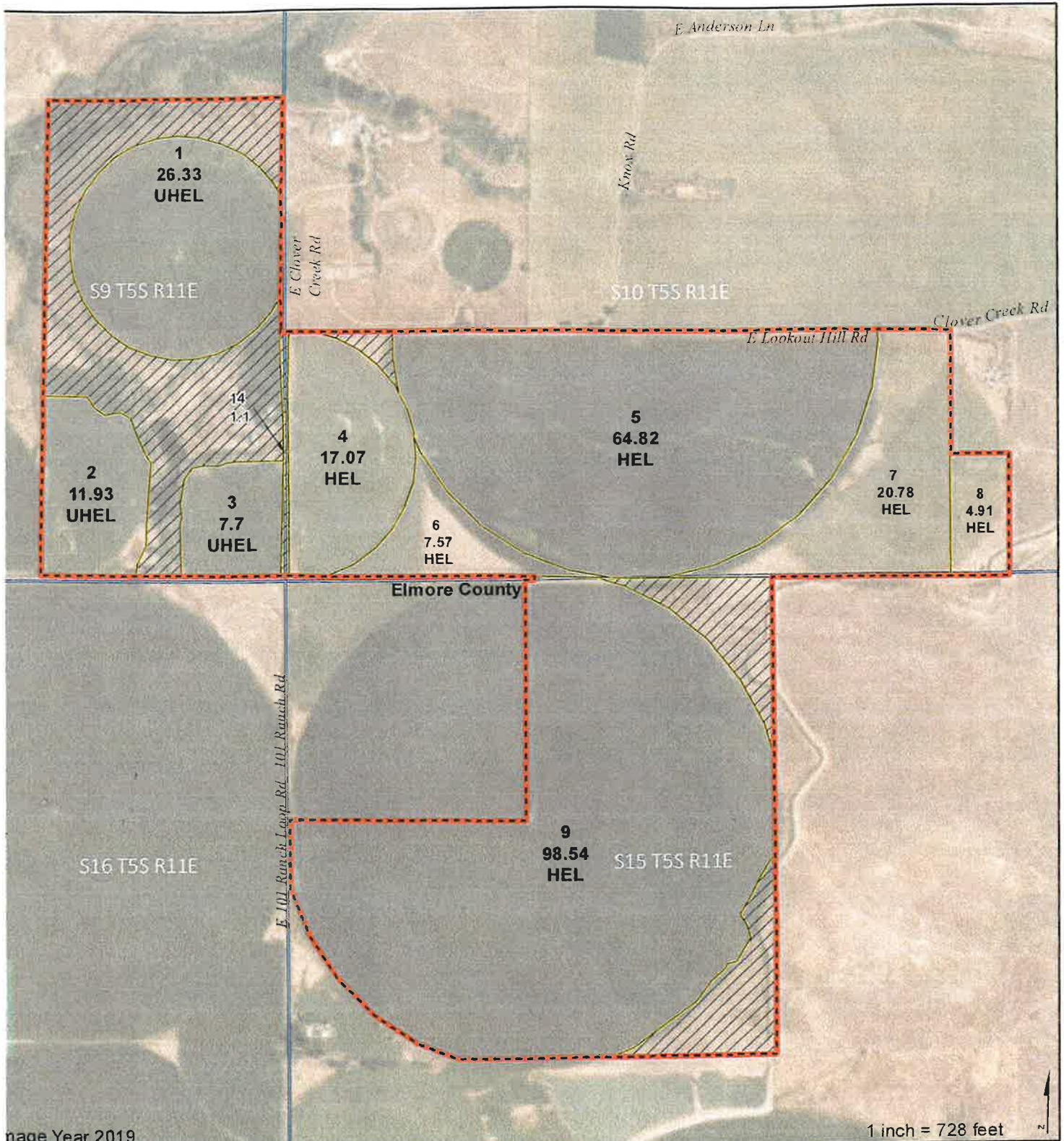


Image Year 2019

1 inch = 728 feet

Common Land Unit

Wetland Determination Identifiers

Tract Cropland Total: 259.65 acres

2020 Program Year

Map Created April 13, 2020

Farm 2051
Tract 17

United States Department of Agriculture (USDA) Farm Service Agency (FSA) maps are for FSA Program administration only. This map does not represent a legal survey or reflect actual ownership; rather it depicts the information provided directly from the producer and/or National Agricultural Imagery Program (NAIP) imagery. The producer accepts the data 'as is' and assumes all risks associated with its use. USDA-FSA assumes no responsibility for actual or consequential damage incurred as a result of any user's reliance on this data outside FSA programs. Wetland identifiers do not represent the size, shape, or specific determination of the area. Refer to your original determination (CPA-026 and attached maps) for exact boundaries and determinations or contact USDA Natural Resources Conservation Service (NRCS).



State of Idaho

DEPARTMENT OF WATER RESOURCES

Southern Region • 650 ADDISON AVE W STE 500 • TWIN FALLS, ID 83301-5858
Phone: (208)736-3033 • Fax: (208)736-3037 • Website: www.idwr.idaho.gov

Brad Little
Governor

Gary Spackman
Director

February 25, 2021

SEAN MALONEY POWERS
7561 E 101 RANCH LOOP RD
KING HILL ID 83633-3390

AUDRA L POWERS
7561 E 101 RANCH LOOP RD
KING HILL ID 83633-3390

Re: Change in Ownership for Water Right Nos: 37-8099, 37-13335 & 37-13336

Dear Water Right Holders:

The Department of Water Resources (Department) acknowledges the receipt of correspondence changing ownership of the above referenced water rights 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,

Bill Mills
Water Resource Agent, Senior

Enclosures