Form 42-248/42-1409(6) Rev. 1/15

RECEIVED
JUN 26 2019
Department of Water Resources
Eastern Region

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. 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?
29-403 OK	Yes ☐	Yes ☐	29-420 OK	Yes ☐	Yes ☐
29-404 OK	Yes ☐	Yes ☐	29-4102 OK	Yes ☐	Yes ☐
29-405 OK	Yes ☐	Yes ☐	29-4187 OK	Yes ☐	Yes ☐
29-406 OK	Yes ☐	Yes ☐	29-4365 OK	Yes ☐	Yes ☐
29-419 OK	Yes ☐	Yes ☐	29-13422 OK, 29-13423 OK	Yes ☐	Yes ☐

2. Previous Owner's Name: Sheldon and Cheryl Hatley
Name of current water right holder/claimant

3. New Owner(s)/Claimant(s): Sheldon Hatley
New owner(s) as listed on the conveyance document — Name connector ☐ **and** ☐ **or** ☐ **and/or**

13589 S Thacker — Mailing address
Arimo — City
ID — State
83214 — ZIP

208-220-2602 — Telephone
hatley1@yahoo.com — 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: Oct 18, 2016.

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: Sheldon Hatley — Signature of new owner/claimant; Owner — Title, if applicable; 6-18-2019 — Date

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

For IDWR Office Use Only: no fee required

Receipted by _____ Date _____ Receipt No. _____ Receipt Amt. _____

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 CR Date 6/28/2019

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 NOVEMBER 03, 2016 State File No. 2016-10892

DECEDENT - LEGAL NAME: CHERYL RUTH HATLEY			
SEX: FEMALE	SOCIAL SECURITY NUMBER: [redacted]	AGE: 54 YEARS	DATE OF BIRTH: JUNE 08, 1962
BIRTHPLACE: STOUGHTON, WISCONSIN		PLACE OF RESIDENCE: ROBIN, IDAHO	
MARITAL STATUS AT TIME OF DEATH: MARRIED	NAME OF SURVIVING SPOUSE (If wife, maiden name): SHELDON BRYON HATLEY		WAS DECEDENT EVER IN U.S. ARMED FORCES? NO
FATHER - NAME: GENE ALLEN EHLE			BIRTHPLACE: WISCONSIN
MOTHER - MAIDEN NAME: SHIRLEY MAE STRAAVALDSON			BIRTHPLACE: WISCONSIN
METHOD OF DISPOSITION: BURIAL	FUNERAL SERVICE LICENSEE: BRAD C. HORSLEY		
NAME AND ADDRESS OF FUNERAL FACILITY: BENSON-HORSLEY FUNERAL HOMES, MALAD CITY, IDAHO			
DATE OF DEATH: OCT. 18, 2016	TIME OF DEATH: 8:12 A.M.	CITY, TOWN OR LOCATION OF DEATH: MERIDIAN, IDAHO	COUNTY OF DEATH: ADA
CAUSE OF DEATH (underlying cause last) a. CEREBRAL VASCULAR ACCIDENT			Approximate Interval Between Onset and Death: WEEKS
DUE TO (or as a consequence of): b. OVARIAN CANCER WITH METASTASIS			YEARS
DUE TO (or as a consequence of): c.			
DUE TO (or as a consequence of): d.			
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: AARON D. MOORHOUSE, D.O.		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

AMENDED 11/21/2016

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: NOVEMBER 22, 2016

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

SCANNED JUN 2[illegible] 2016

PBNCO (Rev) 11/15

State of Idaho
DEPARTMENT OF WATER RESOURCES
Eastern Region • 900 N SKYLINE DR STE A • IDAHO FALLS, ID 83402-1718
Phone: (208)525-7161 • Fax: (208)525-7177 • Website: www.idwr.idaho.gov

Brad Little
Governor

Gary Spackman
Director

June 28, 2019

SHELDON HATLEY
13589 S THACKER RD
ARIMO ID 83214-1551

Re: Change in Ownership for Water Right No(s): 29-403, 29-404, 29-405, 29-406, 29-419, 29-420, 29-4102, 29-4187, 29-4365, 29-13422, 29-13423

Dear Water Right Holder(s):

The Department of Water Resources (Department) acknowledges the receipt of correspondence updating 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) 497-3779.

Sincerely,

Cher Ramos
Technical Records Specialist 1

Enclosure(s)

cc: Water District 29B
Water District 29H