

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

RECEIVED

MAY 10 2019

Department of Water Resources
Eastern 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?
34-53 F <i>OK</i>	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: Joseph R. Kewcher / Jane Kewcher
Name of current water right holder/claimant
3. New Owner(s)/Claimant(s): Joni H. Rose / Terri Kewcher / Patti Kewcher (Patti Ann Allen)
New owner(s) as listed on the conveyance document
- Name connector ☐ and ☐ or ☒ and/or
- Mailing address: 275 Willis City: Blackfoot State: Id. ZIP: 83221
- Telephone: 208-317-7448 Email: R99.Rose@msn.com

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: January 30, 2019
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: Joni H. Rose Title, if applicable: _____ Date: 5-3-2019
Signature of new owner/claimant
- Signature: Terri Kewcher Title, if applicable: _____ Date: 5-3-2019
Signature of new owner/claimant
- Signature: Patti Kewcher Title, if applicable: _____ Date: 5-3-2019

For IDWR Office Use Only:

Received by: [Signature] Date: 5/10/2019 Receipt No.: E044961 Receipt Amt: \$25.-

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: JB Processed by: CR Date: 5/21/2019

536356

BINGHAM COUNTY RECORDER
BLACKFOOT, IDAHO

FEE 10 DEP C

2004 JAN 12 AM 11:04

REVOCABLE POWER OF ATTORNEY

RECORDED AT THE REQUEST OF

KNOW ALL MEN BY THESE PRESENTS:

I, Joseph R. Kerscher, of 759 South Stout Avenue, Blackfoot, Bingham County, State of Idaho, have made, constituted and appointed, and by these presents do make, constitute and appoint my wife, Jane Kerscher, my true and lawful attorney for me and in my name, place and stead ^{as} and for my use and benefit. In the event that Joseph R. Kerscher is unable or unwilling to act, then I appoint Jane Kerscher my true and lawful attorney for me and in my name, place and stead and for my use and benefit to:

1. Collect proceeds from insurance policies due me as beneficiary or otherwise.
2. Sell stocks, bonds, or other securities for me and in my name.
3. Sell real property belonging to me or in which I may have an interest and to execute the proper instruments and deeds therefore.
4. Ask, demand, sue for, recover, collect and receive all such sums or money, debts, dues, accounts, legacies, bequests, interest, dividends, annuities and demands whatsoever, as are now or shall hereafter become due, owing, payable, or belonging to me, and to have, use, and take, all lawful ways and means in my name or otherwise, for the same and acquittances to other sufficient discharges for the same, for me and in my name.
5. Lease, let, demise, bargain, sell, remise, release, convey, mortgage and hypothecate, lands, tenements, and hereditaments, upon such terms and conditions and under such covenants as she/he shall think fit: and
6. Make, do and transact all and every kind of business of whatsoever nature or kind, and also for me and in my name and as my acts execute deeds, covenants, indentures, agreements or other instruments in writing of whatever kind and nature as may be necessary or proper in the premises.

GIVING AND GRANTING unto my said attorney ~~full~~ full power and authority to do and perform all and every act and thing whatsoever requisite and necessary to be done in and about the premises, as fully and to all extents and purposes as I might or could do if personally present, hereby ratifying and confirming all that said attorney shall lawfully do or cause to be done by virtue of these presents.

THIS POWER OF ATTORNEY shall exist and continue through any and all incompetency or other disability I may have now or in the future.

THIS POWER OF ATTORNEY shall be revocable at any time by me and only shall apply if I am unable to conduct my own affairs.

IN WITNESS WHEREOF, I HAVE HEREUNTO SET MY HAND THIS
25 day of SEPTEMBER

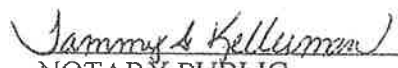

JOSEPH R. KERSCHER



SIGNED IN THE PRESENCE OF:

STATE OF IDAHO)
)ss
COUNTY OF BINGHAM)

On this 25th day of Sept., 2003, personally appeared before me Joseph R. Kerscher, the signer of the foregoing instrument, and duly acknowledged to me that he executed the same.


NOTARY PUBLIC
State of Idaho
County of Bingham
Commission expires 7-19-2006

536356

STATE OF IDAHO CERTIFICATION OF VITAL RECORD

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

CERTIFICATE OF DEATH

STATE FILE NO.

Local Reg. No. 76

DECEDENT TYPE OR PRINT IN PERMANENT BLACK INK DO NOT USE FELT TIP PEN FOR INSTRUCTIONS SEE HANDBOOKS	1. DECEDENT'S LEGAL NAME (Include AKA's if any) (First, Middle, Last, Suffix) JOSEPH R. KERSCHER		2. SEX MALE	3. SOCIAL SECURITY NUMBER [REDACTED]	
	4a. AGE-Last 8 months / 4b. UNDER 1 YEAR / 4c. UNDER 1 DAY 76 (Years)		5. DATE OF BIRTH (Mo/Day/Yr) DECEMBER 29, 1931		
	6. BIRTHPLACE (City and State, Territory, or Foreign Country) SALT LAKE CITY, UTAH				
	7a. RESIDENCE - STATE OR FOREIGN COUNTRY IDAHO		7b. COUNTY BINGHAM		
	7c. CITY OR TOWN BLACKFOOT		7d. APT. NO. / 7e. ZIP CODE 83221		
8. MARITAL STATUS AT TIME OF DEATH ☒ Married ☐ Married, but separated ☐ Widowed ☐ Divorced ☐ Never married ☐ Unknown JANE BOWMAN					
PARENTS	11a. FATHER'S NAME (First, Middle, Last, Suffix) JACK D. KERSCHER		11b. BIRTHPLACE (State, Territory, or Foreign Country) MONTANA		
	12a. MOTHER'S MAIDEN NAME (First, Middle, Last, Suffix) MARIE STARK		12b. BIRTHPLACE (State, Territory, or Foreign Country) UTAH		
	13a. INFORMANT'S NAME (Type or print) JANE KERSCHER				
	13b. RELATIONSHIP TO DECEDENT SPOUSE				
	13c. MAILING ADDRESS (Street and Number, City, State, Zip Code) 759 S. STOUT, BLACKFOOT, IDAHO 83221				
DISPOSITION	14. METHOD OF DISPOSITION ☐ Burial ☒ Cremation ☐ Donation ☐ Removal from Idaho ☐ Other (Specify) BLACKFOOT CREMATORY 132 S. SHILLING AVE. BLACKFOOT, IDAHO 83221		16. NAME AND COMPLETE ADDRESS OF FUNERAL FACILITY HAWKER FUNERAL HOME 132 S. SHILLING AVE. BLACKFOOT, IDAHO 83221		
	17a. SIGNATURE OF FUNERAL SERVICE LICENSEE OR PERSON ACTING AS SUCH <i>[Signature]</i>		17b. LICENSE NUMBER (Of license) M-938		18. WAS CORONER CONTACTED DUE TO CAUSE OF DEATH? ☐ Yes ☒ No
	19. IF DEATH OCCURRED IN A HOSPITAL: 19a. IF DEATH OCCURRED SOMEWHERE OTHER THAN A HOSPITAL: ☐ Inpatient ☐ Outpatient ☐ DCA ☐ Hospice facility ☐ Nursing home/Long term care facility ☒ Decedent's home ☐ Other (Specify) 759 S. STOUT BLACKFOOT, 83221 BINGHAM				
	23. DATE OF DEATH (Mo/Day/Yr) (Spell month) APRIL 12, 2008		24. TIME OF DEATH 1055 (24 hr)		25. DATE PROCLAIMED DEAD (Mo/Day/Yr) (Spell month) APRIL 12, 2008
	26. TIME PROCLAIMED DEAD 1055 (24 hr)				
CAUSE OF DEATH	27. CAUSE OF DEATH 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: Long Cancer DUE TO (or as a consequence of): DUE TO (or as a consequence of): DUE TO (or as a consequence of):				
	28a. DID TOBACCO USE CONTRIBUTE TO DEATH? ☐ Yes ☐ Probably ☐ No ☐ Unknown				
	28b. IF FEMALE (Aged 10-54): ☐ Not pregnant within past year ☐ Not pregnant, but pregnant 43 days to 1 year before death ☐ Not pregnant, but pregnant within 42 days of death ☐ Unknown if pregnant within the past year				
	31. MANNER OF DEATH ☒ Natural ☐ Homicide ☐ Accident ☐ Pending investigation ☐ Suicide ☐ Could not be determined				
	32. DATE OF INJURY (Mo/Day/Yr) (Spell month) APRIL 12, 2008				
CERTIFIER IF DEATH WAS DUE TO OTHER THAN NATURAL CAUSES, THE CORONER MUST COMPLETE AND SIGN THE CERTIFICATE	33. TIME OF INJURY 1055 (24 hr)		34. PLACE OF INJURY (Decedent's home, farm, street, construction site, nursing home, restaurant, forest, etc.) 759 S. STOUT, BLACKFOOT, IDAHO 83221		
	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 38a. WAS DECEDENT: ☐ Driver/Operator ☐ Passenger ☐ Pedestrian ☐ Other (Specify) 38b. WHAT SAFETY DEVICE(S) DID DECEDENT USE/EMPLOY? ☐ Seat belt ☐ Child safety seat ☐ Helmet ☐ Air bag ☐ None ☐ Unknown				
	39a. CERTIFIER (Check only one, based on official capacity for this certificate) ☒ PHYSICIAN - To the best of my knowledge, death occurred at the time, date, and place, and due to the natural cause(s)/manner stated. ☐ PHYSICIAN ASSISTANT - 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. ☐ CORONER Signature and Title of Certifier: <i>[Signature]</i> CHRISTIAN SHULL, M.D., 2330 DESOTO ST., IDAHO FALLS, IDAHO 83404				
40a. CORONER'S SUBSEQUENT SIGNATURE IF NECESSARY: The coroner's signature in this item supersedes that of the physician, physician assistant, or advanced practice professional nurse, and the coroner becomes the certifier of record. I have reviewed and if necessary amended the medical opinion: _____		40b. DATE SIGNED MM / DD / YYY 04 / 12 / 2008			
41a. REGISTRAR'S SIGNATURE <i>[Signature]</i> This is a true and correct reproduction of the document officially registered and placed on file with the IDAHO BUREAU OF HEALTH POLICY AND VITAL STATISTICS.		41b. DATE SIGNED MM / DD / YYY 04 / 22 / 2008			

DATE ISSUED: April 22, 2008

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

JANE S. SMITH
STATE REGISTRAR

Send Tax Notices:
Joni K. Rose
275 Willis St.
Blackfoot, ID 83221

233945
Custer County Reg. of
Murray Jim Sorenson
Time 11:03 AM Date 1/4 2019
Lura H. Baker, Clerk
Deputy
\$15.00

DEED OF GIFT

THIS INDENTURE made this 30 day of January, 2019, by and between JANE KERSCHER, a widow, of 759 S. Stout, Blackfoot, County of Bingham, State of Idaho, Grantor, and JONI K. ROSE, a married woman as her sole and separate property, of 275 Willis St., Blackfoot, County of Bingham, State of Idaho; and TERRI KERSCHER, a single person, of 759 S. Stout, Blackfoot, County of Bingham, State of Idaho; and PATTI ANN ALLEN, a single person, of 759 S. Stout, Blackfoot, County of Bingham, State of Idaho, Grantees;

WITNESSETH

The Grantor, for and in consideration of the love and affection which she bears toward her above-named children, Grantees, does hereby give, grant and convey unto his above-named children, Grantees, as their sole and separate property, and as tenants in common, all of the Grantor's interest in that certain real property located in the County of Custer, State of Idaho, and described in Exhibit "A" attached hereto.

TO HAVE AND TO HOLD, all and singular, the above-described premises, together with appurtenances, unto the said Grantees, their heirs and assigns forever, subject to the heretofore stated conditions and reservations.

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

Jane Kersch
JANE KERSCHER

255945

On this 30 day of January, 2019, before me, the undersigned, a notary public in and for said state, personally appeared JANE KERSCHER , known to me to be the person whose name is subscribed to the within instrument and acknowledged to me that she executed the same.

MURRAY JIM BURENSEN
COMMISSION #66148
NOTARY PUBLIC
STATE OF IDAHO
MY COMMISSION EXPIRES 08/20/2021

Page 2 of 3

255945

Send Tax Notices;
Joni K. Rose
275 Willis St.
Blackfoot, ID 83221

EXHIBIT "A"
LEGAL DESCRIPTION

A portion of Homestead Entry Survey No. 423, said Survey No. 423, embracing a portion of approximately Sections 25, 26, 35 and 36 in Township 7 North, Range 19 East Boise Meridian, in Custer County, Idaho, more particularly described as follows:

Beginning at a point on the Westerly boundary of said Survey No. 423, which point bears North 12°26' West 1,212.55 feet from corner No. 4 of said Survey No. 423; thence First, from said point of beginning along said Westerly boundary North 12°26' West 202.09 feet; thence Second, leaving said Westerly boundary North 65°51' East 989.80 feet to the Easterly boundary of said Survey No. 423; thence Third, along said Easterly boundary, South 12°25' East 202.10 feet; thence Fourth, leaving said Easterly boundary South 65°51' West 989.74 feet to the point of beginning, containing an area of 4.50 acres, more or less;

Together with the appurtenances thereunto appertaining and belonging, and specifically including all ditches, ditch rights of way, water and water rights; Further granting to the Purchasers herein an easement for ingress and egress only of a strip of land 15 feet in width along the entire Southeasterly line of Lot 8, located next to the property conveyed hereunder;

Subject to all existing rights-of-ways for public highways, utility lines, existing roadways, irrigation ditches and all building, zoning and other restrictions of use and all encumbrances of record;

Reserving, however, to the Vendors an easement of ingress and egress on a strip of land 15 feet in width along the entire Northwestern line of Lot 7, which is the parcel conveyed hereunder.

State of Idaho
Department of Water Resources

Water Right
34-53F

IRRIGATION

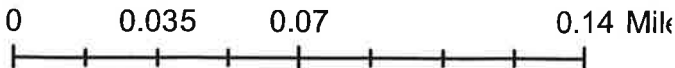
The map depicts the place of use for the water use listed above and point(s) of diversion of this right as currently derived from interpretations of the paper records and is used solely for illustrative purposes. Discrepancies between computer representation and the permanent document file will be resolved in favor of the actual water right contained in the water right file.

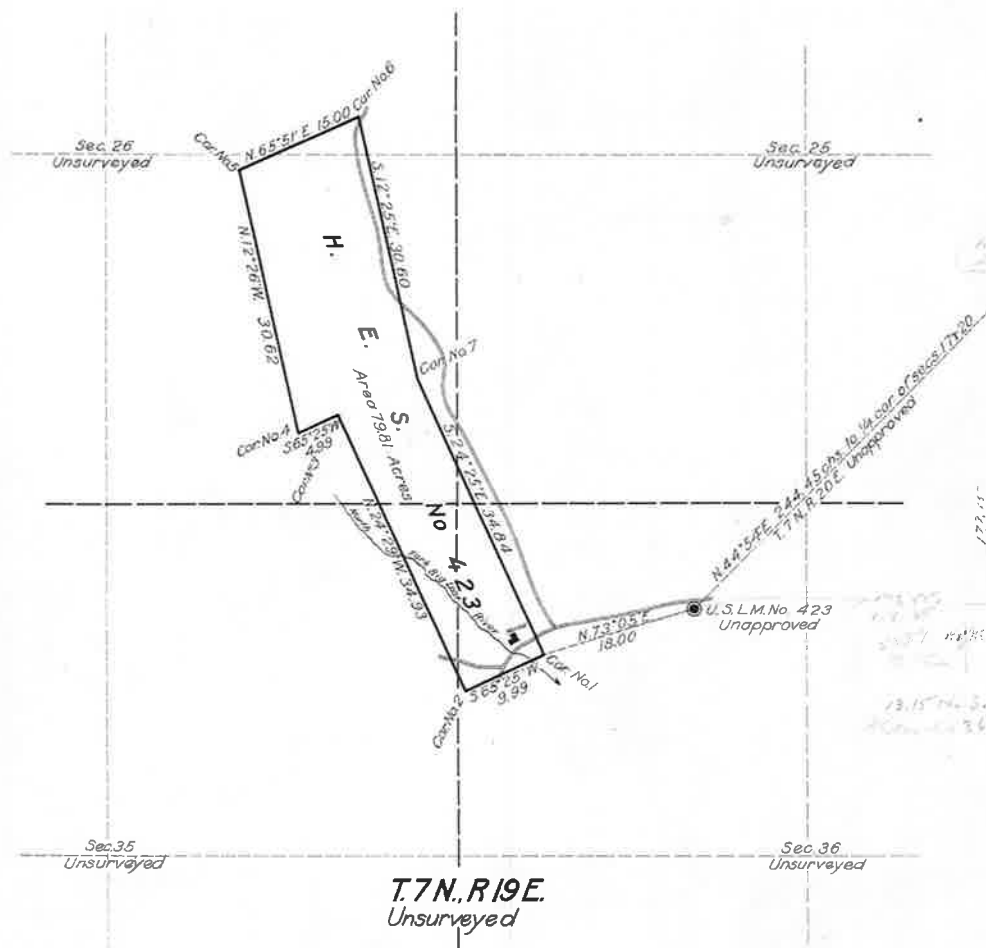
19E

07N



Point of Diversion





Plat of
**HOMESTEAD
ENTRY SURVEY**

No. 423 **PATENTED**

in the

LEMHI

NATIONAL FOREST

in

Section 25, unsurveyed, T. 7 N., R. 19 E.

Section 26, unsurveyed, T. 7 N., R. 19 E.

Section 35, unsurveyed, T. 7 N., R. 19 E.

Section 36, unsurveyed, T. 7 N., R. 19 E.

of the

BOISE BASE AND MERIDIAN

IDAHO

This plat of Homestead Entry Survey
No. 423 State of Idaho is
strictly conformable to the field notes
thereof on file in this office, which
have been examined and approved.

U.S. Surveyor General's Office

Boise, Idaho.

August 24, 1917

Edward Madden
U.S. Surveyor General

SCALE 10 chains to 1 inch

Survey Designated	By whom Surveyed	Dist. Cont. Group No.	Date	When Surveyed Began	Completed	Date of Approval
U.S.L.M. No. 423	R.D. Gerver	423	Apr. 26, 1916	Sep. 26, 1916	Sep. 27, 1916	
H.E.S. No. 423		423				Aug. 24, 1917
H.E.S. No. 60 Rejected	J. Henry Diers	60	June 29, 1910	Aug. 6, 1910	Aug. 6, 1910	Oct. 15, 1910

	Areas in Acres
H.E. Survey No. 423	Conflicts
In Section	
In Section	
In Section	
In Section	
Total	79.61

Act of June 11, 1906 Act of Aug. 11, 1916

List No. 1192 Dated Mar. 12, 1908

Latitude 43° 54' 30" N. Longitude 114° 08' W. Mean Mag. Decl. 19° 50' E. Observations at Corner No. 1

J.F.D.



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

May 21, 2019

JONI ROSE
275 WILLIS ST
BLACKFOOT ID 83221-3363

TERRI KERSCHER
275 WILLIS ST
BLACKFOOT ID 83221-3363

PATTI KERSCHER
275 WILLIS ST
BLACKFOOT ID 83221-3363

Re: Change in Ownership for Water Right No(s): 34-53F

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) 525-7161.

Sincerely,

Cher Ramos
Technical Records Specialist 1

Enclosure(s)

cc: Water District 34
Big Lost River Ground Water District