

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

RECEIVED

JAN 15 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?
21-74020K	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: David & Janna Woods (deceased)
Name of current water right holder/claimant
3. New Owner(s)/Claimant(s): David Woods
New owner(s) as listed on the conveyance document
- Mailing address: 1882 E 350 N City: St Anthony State: ID ZIP: 83445
- Telephone: (208) 624-4598 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: _____
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: David O. Woods Title, if applicable: _____ Date: 1-15-19

Signature of new owner/claimant

Signature: _____ Title, if applicable: _____ Date: _____

Signature of new owner/claimant

For IDWR Office Use Only: No fee required/Remove Janna deceased

Received 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 JB Processed by CR Date 1/18/19

CERTIFICATE OF VITAL RECORD

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

Date Filed JULY 14, 2004

State File No. 2004-04995

DECEDENT - LEGAL NAME JANNA CLAIRE WOODS			
SEX FEMALE	SOCIAL SECURITY NUMBER [REDACTED]	AGE 54 YEARS	DATE OF BIRTH JUNE 20, 1950
BIRTHPLACE CEDAR CITY, UTAH		PLACE OF RESIDENCE ST. ANTHONY, IDAHO	
MARITAL STATUS AT TIME OF DEATH MARRIED		NAME OF SURVIVING SPOUSE (if wife, maiden name) DAVID O. WOODS	WAS DECEDENT EVER IN U.S. ARMED FORCES? NO
FATHER - NAME DUWAYNE WILLIAMS			BIRTHPLACE UTAH
MOTHER - MAIDEN NAME BONNIE CLAIR VERNON			BIRTHPLACE UTAH
METHOD OF DISPOSITION BURIAL		FUNERAL SERVICE LICENSEE BRUCE W. BAXTER	
NAME AND ADDRESS OF FUNERAL FACILITY FLAMM FUNERAL HOME, INC., REXBURG, IDAHO			
DATE OF DEATH JULY 04, 2004	TIME OF DEATH 5:40 P.M.	CITY, TOWN OR LOCATION OF DEATH REXBURG, IDAHO	COUNTY OF DEATH MADISON
CAUSE OF DEATH (underlying cause last) a. CARDIAC ARRHYTHMIA			Approximate Interval Between Onset and Death 3 MINUTES
b. DUE TO (or as a consequence of): POTASSIUM OVERDOSE / ACCIDENTAL			
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 ACCIDENT		NAME OF CERTIFIER RICK DAVIS	TITLE CORONER
CORONER SUBSEQUENT CERTIFICATION IF NECESSARY			
EXTERNAL CAUSES ONLY			
DATE OF INJURY JULY 04, 2004	TIME OF INJURY 5:30 P.M.	PLACE OF INJURY HOME	INJURY AT WORK? NO
LOCATION WHERE INJURY OCCURRED 1882 E 350 N, ST ANTHONY, IDAHO			
DESCRIPTION OF HOW INJURY OCCURRED HAD SEVERE LEG CRAMPS/TOOK TOO MANY POTASSIUM PILLS			

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.

DATE ISSUED: JULY 15, 2004

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



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

January 18, 2019

DAVID O WOODS
1882 E 350 N
SAINT ANTHONY ID 83445-5206

Re: Change in Ownership for Water Right No(s): 21-7402

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. Janna Woods has been removed as a current owner. 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: Henry's Fork Ground Water District
Water District 01
Water District 100