

WITHDRAWNSTATE OF IDAHO
DEPARTMENT OF WATER RESOURCES**Notice of Change in Water Right Ownership**RECEIVED
OCT 06 2017
WATER RESOURCES
WESTERN REGION

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?
65-4891B	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: Lee F Margrave
Name of current water right holder/claimant
3. New Owner(s)/Claimant(s): Cheryl A. Harvey
New owner(s) as listed on the conveyance document Name connector ☐ and ☐ or ☐ and/or
- 4233 Antiquity Way Modesto CA 95356
Mailing address City State ZIP
- 209-480-7200 cheryl@castle-re.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: 1-14-14 in family since 2001
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: Cheryl A. Harvey owner Oct. 1, 2017
 Signature of new owner/claimant Title, if applicable Date

Signature: _____ Title, if applicable Date

For IDWR Office Use Only:

Received by CS Date 10/06/17 Receipt No. W045724/W045725 Receipt Amt. \$100^e / \$25^a

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 X Approved by X Processed by X Date X



U.S. Department of State
REPORT OF DEATH OF A U.S. CITIZEN OR U.S. NON-CITIZEN NATIONAL ABROAD

Panama, Republic of Panama
Post

03-03-2014
Date of Issue (mm-dd-yyyy)

SSA No. _____

Name in full Frank Lee Margrave Age 59

Date (mm-dd-yyyy) and Place of Birth 12-29-1954 Lenoir City, Tennessee United States of America

Evidence of U.S. Citizenship Regular Passpo ssued on February 13, 2013

Address in U.S.A. 5807 SE, 1st. Ave., New Plymouth, Idaho 83655 United States Of America

Permanent or Temporary Address Abroad Panama Sport Fishing Hotel, San Lorenzo, Boca Chica, Chiriqui, Panama

Date of death January 14 6 00 p.m. 2014
Month Day Hour Minute Year

Place of death Panama Sport Fishing Hotel, San Lorenzo, Boca Chica Chiriqui Panama
Number and street, or Hospital/hotel Province Country

Cause of death Burned to Death as per Panamanian Death Certificate, registered on January 17, 2014
Including authority for statement - if physician, include full name and official title, if any.

Disposition of the remains Cremated, Remains were shipped to Sterling, Colorado, U.S.A.

Local law governing disinterment of remains provides that N/A

Disposition of the effects Dustin Curci, son

Person or official responsible for custody of effects and accounting therefore Dustin Curci, son

Traveling/residing abroad with relatives or friends as follows:

NAME ADDRESS

NAME	ADDRESS	DATE (mm-dd-yyyy) NOTIFIED
<u>Cheryl Harvey</u>	<u>5807 SE 1st Ave. New Plymouth, ID USA 83655</u>	<u>01-14-2014</u>

NAME	ADDRESS	DATE (mm-dd-yyyy) SENT
<u>Dustin Curci</u>	<u>168 Delaware Drive Sterling, CO USA 80751</u>	<u>03-03-2014</u>
<u>Cheryl Harvey</u>	<u>5807 SE 1st Ave. New Plymouth, ID USA 83655</u>	<u>03-03-2014</u>

Notification or copy sent to Federal Agencies: SSA ☒ VA ☐ CSC ☐ Other ☐ Vital Records Office- Teneese
State Agency

The original copy of this document and information concerning the effects are being placed in the permanent files of the U.S. Department of State, Washington, DC 20520.

Remarks:

U.S. Passport No. was not found after the incident; it is believed that it got buried in the incident.

(Continue on reverse if necessary.)

[SEAL]

Christopher Reyes
Signature on all copies.

Christopher Reyes of the United States of America.
Vice Consul

(Last name)
Margrave

(First name)
Frank

(Middle name)
Lee

(Date (mm-dd-yyyy) of death)
01-14-2014

REPÚBLICA DE PANAMÁ
TRIBUNAL ELECTORAL
DIRECCIÓN NACIONAL DEL REGISTRO CIVIL
FORMULARIO ÚNICO DE PARTE CLÍNICA DE DEFUNCIÓN

Núm. 78910

Parte núm. _____

Blanca	Tribunal Electoral (Reg. Civil)	Amarilla	Contraloría General (NEC)	Verde	Instalación de Salud
1. Nombre: <u>FRANK</u> <u>LEE</u> <u>MARGRAVE</u>					
2. Sexo: Masculino ☐ 1 ☒ Femenino ☐ 2					
3. Cédula o pasaporte núm. <u>741-0444</u>					
4. Nacionalidad: <u>Estadounidense</u>					
5. Seguro social núm. _____					
6. Ocupación: <u>Trabajador</u>					
7. Fecha de nacimiento: <u>2-1-1959</u> día mes año					
8. Edad cumplida: <u>59</u> años					
9. Fecha de la defunción: <u>11</u> <u>ENERO</u> <u>2014</u> día mes año					
10. Estado conyugal: Soltero ☐ 1 Unido ☒ 2 Casado ☐ 3 Separado/divorciado ☐ 4 Viudo ☐ 5 Menor de 15 años ☐ 6					
11. Nombre de los padres: <u>FRANK MARGRAVE</u> y <u>JOSE LUIS MARGRAVE</u>					
12. Lugar de la defunción: <u>San Lorenzo</u> <u>Barra Chica</u> <u>Hotel Panama</u>					
13. Lugar de residencia: <u>Edificio</u> <u>New Plymouth</u> <u>5307 SE 1st Avenue</u>					
14. Lugar donde nació el niño: Instalación de salud ☐ 1 Alrededor al parto: Materna ☐ 1 Téc. en intern. ☐ 3 Comadrona ☐ 5					
Duración del embarazo: <u>9</u> Semanas completas Pese al nacer: <u>3.5</u> kilogramos <u>7</u> libras					
Dama de la madre: <u>Nombre (a) y apellido (a):</u>					
Edad cumplida: <u>59</u> Estado conyugal: Soltero ☐ 1 Unido ☒ 3 Casado ☐ 2 Otro ☐ 4 Hijos que ha tenido (incluido este): <u>3</u>					
Nivel escolar más alto aprobado: Ninguno ☐ 00 Enseñanza especial ☐ 20 Primaria ☐ Vocacional ☐ Secundaria: Promedia ☐ Media ☐ No universitaria ☐ Universitaria ☐ Postgrado ☐					
15. Causa de la defunción: PARTE I Enfermedad o estado patológico que produjo la muerte directamente: Causas antecedentes: Estados morbosos, si existiera alguno, que originaron la causa consignada arriba, mencionándose en c, la causa básica o fundamental. PARTE II Otros estados patológicos significativos que contribuyeron a la muerte, pero no relacionados con la enfermedad señalada en c.					
16. ¿Si la persona fallecida es una mujer de 10 a 54 años, la defunción estuvo asociada a un embarazo? Si ☐ No ☒ 16a. Estuvo embarazada: En los últimos 42 días ☐ En los últimos 12 meses ☐					
17. ¿Se practicó necropsia? Si ☒ No ☐ 18. Si se intervino quirúrgicamente, ¿cuál fue la causa?					
19. Si la muerte se debió a factores externos, especifique si fue: Accidente ☐ Suicidio ☐ Homicidio ☐ En investigación ☒					
19a. Fecha de la lesión: <u>17</u> <u>01</u> <u>2014</u> día mes año					
19b. ¿Cómo se produjo la lesión? (trauma de vehículo, atropello por vehículo, ahogamiento, etc.)					
19c. Lugar donde ocurrió la lesión (en casa, calle, bar, oficina, etc.)					
20. Certificado que atendió al difunto desde el: <u>17</u> <u>01</u> <u>2014</u> día mes año					
21. Nombre del médico: <u>FRANK LEE MARGRAVE</u> <u>MD</u>					
Firma: <u>[Firma]</u> Título o cargo que desempeña: <u>MD</u> Sello del médico: <u>[Sello]</u> Fecha: <u>17/01/2014</u> Cédula: <u>741-0444</u> Registro: <u>[Registro]</u>					

Observación: ① Sin datos según representación recibida por la embajada de Estados Unidos de América

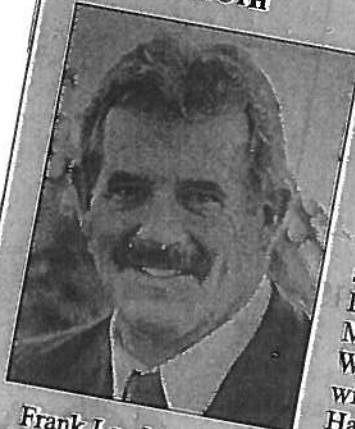
Este documento es válido solo con la firma del médico que certifica la causa de defunción.

NOTA: Es obligación del médico de cabecera, médico de la localidad o médico forense, expedir gratuitamente este documento y entregarlo al Oficial del Registro Civil más cercano a su residencia. (Artículo 80, Ley 21 de 2000, Ley de 2000)

**Frank Lee
Margrave III**

Dec. 29, 1954-Jan. 14, 2014

NEW PLYMOUTH



Frank Lee Margrave III, "Lee", 59 of New Plymouth passed away in an accident in Boca Chica, Panama on January 14, 2014.

Lee was born December 29, 1954 in Clinton, TN to Frank Lee Jr. & Barbara Margrave. He

moved to Oakdale, CA in 1964. Lee graduated from Oakdale High in 1973 and then attended Modesto Junior College. He lived in New Plymouth, ID for over 20 years where he ran Margrave Construction.

Lee was an avid traveler, hunter, fisherman, and advanced scuba diver but his true love was family. He is survived by his son, Dustin Lee (Nicole & Brody) Margrave, grandson Weston Lee Margrave; ex-wife & fiancée, Cheryl Harvey; brother Steve Margrave; sister Beth Stanley; step-children, Chris, Brie & Jenna Harvey.

Services will be held Monday January 27, 2014 at 11 AM at Heart 'n Home 1100 NW 12th Street Fruitland, ID 83619. Additional services will be held in Oakdale, CA.

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642-4393-936 2nd Ave. S., Payette

**Have local
announcements or s**

Submissions may be sent to The
at editor@argusobserver.com or (

FILED
THIRD JUDICIAL DISTRICT COURT
PAYETTE COUNTY, IDAHO

FEB 04 2014

BETTY J. DRESSEN, CLERK
BY DEPUTY

REECE M. HRIZUK
Attorney at Law
1511 N. Whitley Drive
Fruitland, ID 83619-2266
ISB #9015
Telephone: (208) 452-4000
Fax: (208) 452-3044

IN THE DISTRICT COURT OF THE THIRD JUDICIAL DISTRICT OF THE
STATE OF IDAHO, IN AND FOR THE COUNTY OF PAYETTE

MAGISTRATE DIVISION

In the Matter of the Estate)

Case No. CV 2014- 125

of)

FRANK LEE MARGRAVE, III)

LETTERS TESTAMENTARY

Deceased.)

The Will of **FRANK LEE MARGRAVE, III** having been
admitted to informal probate, **CHERYL ANN HARVEY** is hereby
appointed Personal Representative of the estate of **FRANK LEE**
MARGRAVE, III, deceased.

WITNESS: Robert L Jackson, Magistrate of
the above-entitled Court, with the seal thereof affixed the 4th
day of February, 2014.

/s/ ROBERT L. JACKSON
LAWYER MAGISTRATE

Magistrate

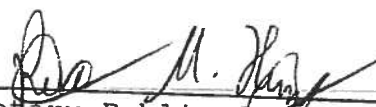
STATE OF IDAHO)
) ss.
County of Payette)

I hereby accept the duties of Personal Representative of the estate of **FRANK LEE MARGRAVE, III**, deceased, and do solemnly swear that I will perform, according to law, the duties of Personal Representative.


CHERYL ANN HARVEY

Subscribed and sworn to before me, this 3rd day of February, 2014.




Notary Public for said State
Residing at: 11912020 Fruitland
Commission Expires: ↓

State of Idaho
County of Payette ss

I hereby certify that the foregoing instrument is a true and correct copy of the original on file in this office.

Dated 2-4-2014
BETTY J. DRESSEN

Clerk of the District Court and
Ex-Officio Auditor and Recorder

By  Deputy

05/23/2001

IDAHO DEPARTMENT OF WATER RESOURCES
PRELIMINARY RECOMMENDATION OF WATER RIGHTS ACQUIRED UNDER STATE LAW

RIGHT NUMBER: 65-4891B

OW
COPY FOR YOUR FILES

NAME AND ADDRESS: LEE F MARGRAVE
SUSAN M MARGRAVE
5807 SE 1ST AVE
NEW PLYMOUTH, ID 83655

SOURCE: WASTE WATER TRIBUTARY: PAYETTE RIVER

QUANTITY: 0.17 CFS

THIS RIGHT WHEN COMBINED WITH RIGHTS OF NOBLE
DITCH CO., LTD. SHALL PROVIDE NO MORE THAN .02 CFS/ACRE

PRIORITY DATE: 04/01/1903

POINT OF DIVERSION:	T07N R04W S12	NESW	Within PAYETTE County
	T07N R04W S12	SESW	Within PAYETTE County
	T07N R04W S13	NWNW	Within PAYETTE County

PURPOSE AND
PERIOD OF USE:

<u>PURPOSE OF USE</u>	<u>PERIOD OF USE</u>	<u>QUANTITY</u>
IRRIGATION	03-15 11-15	0.17 CFS

PLACE OF USE:

<u>IRRIGATION Within PAYETTE County</u>		
T07N R04W S12	NWSE	16

16 ACRES TOTAL

OTHER PROVISIONS NECESSARY FOR DEFINITION OR ADMINISTRATION OF THIS WATER RIGHT:

THIS PARTIAL DECREE IS SUBJECT TO SUCH GENERAL
PROVISIONS NECESSARY FOR THE DEFINITION OF THE RIGHTS
OR FOR THE EFFICIENT ADMINISTRATION OF THE WATER
RIGHTS AS MAY BE ULTIMATELY DETERMINED BY THE COURT
AT A POINT IN TIME NO LATER THAN THE ENTRY OF A FINAL
UNIFIED DECREE. SECTION 42-1412(6), IDAHO CODE.

EXPLANATORY MATERIAL: BASIS OF CLAIM - Decreed

PARCEL NO. 612000

T07N R04W S12 & S13

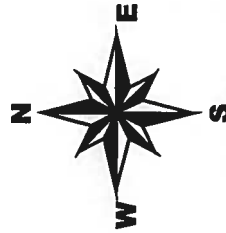
Claims: 65-04891B
Prepared by:
RON HOWERTON
Modified: 3-29-01

 Place of use

 POD

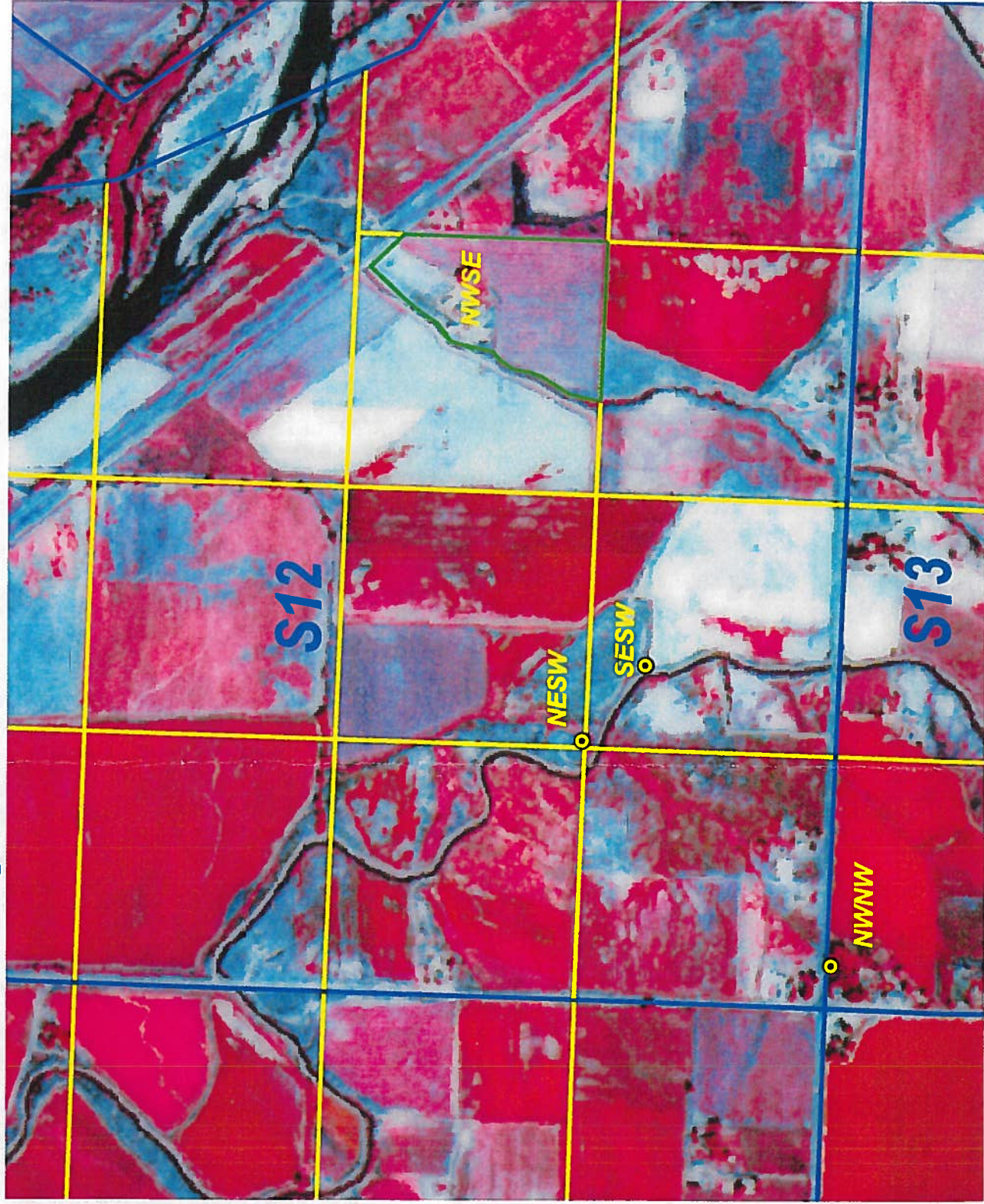
 SECTION

 1/4 1/4

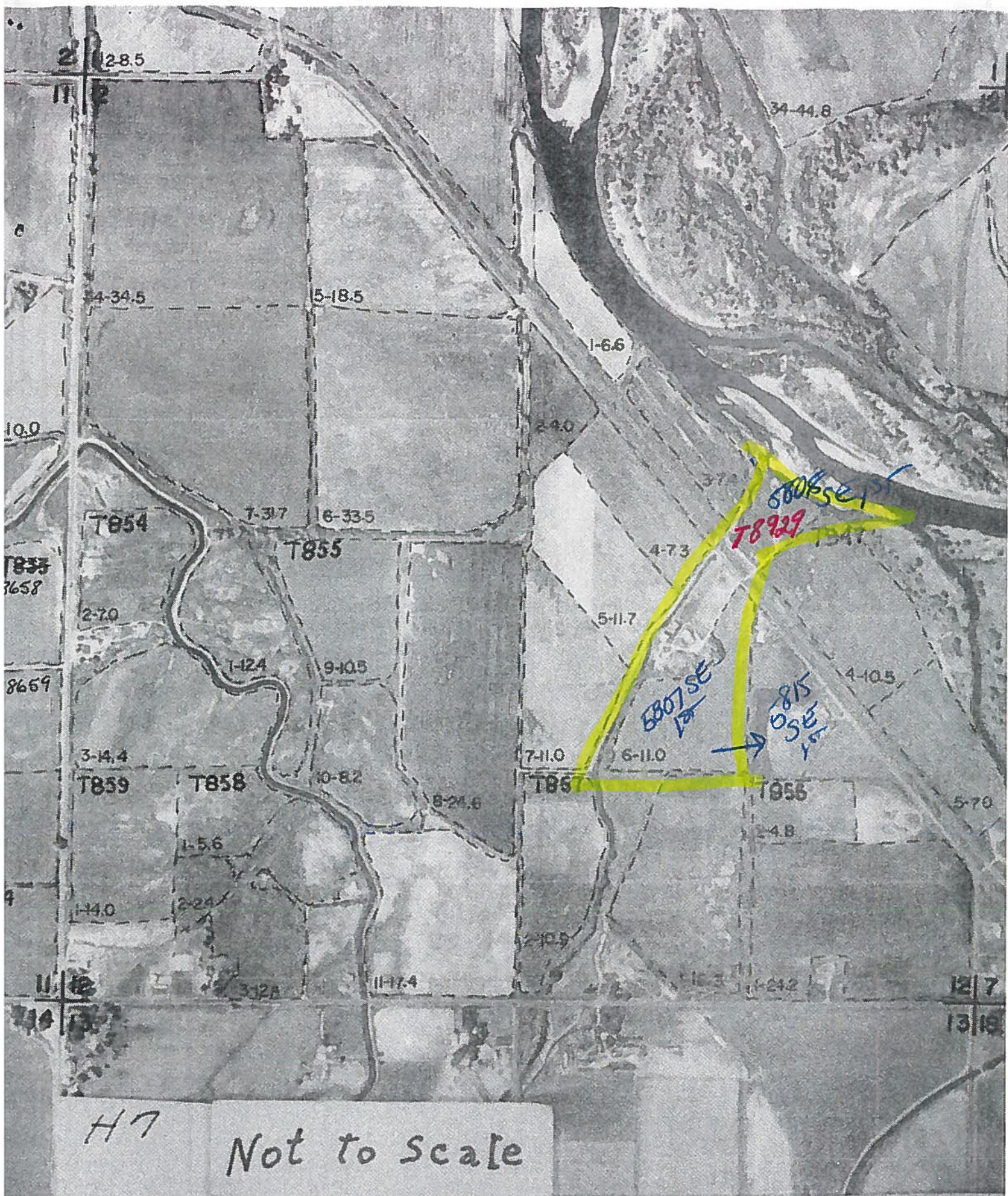


1987 NAPP

Idaho Department of Water Resources



0 0.25 0.5 0.75 1 Miles



H7

Not to Scale

1996



State of Idaho

DEPARTMENT OF WATER RESOURCES

Western Region • 2735 Airport Way • Boise, Idaho 83705-5082

Phone: (208) 334-2190 • Fax: (208) 334-2348 • Website: www.idwr.idaho.gov

C.L. "BUTCH" OTTER
Governor

GARY SPACKMAN
Director

December 12, 2017

CHERYL A HARVEY
4233 ANTIQUITY WAY
MODESTO CA 95356

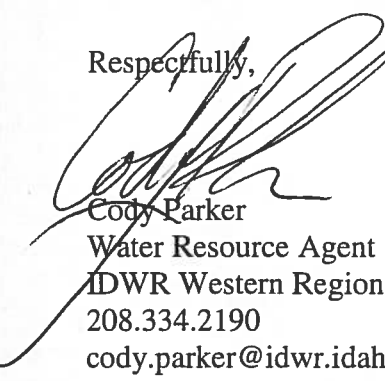
RE: Refund of fees following withdrawal of transfer application and change in ownership

Ms. Harvey,

On October 6, 2017, you submitted both a notice of change in water right ownership and an application for transfer for water right no. 65-4891B. On December 7, 2017, you requested that both of these be withdrawn. Both submissions are now void. I have requested that your payment of \$325 be refunded (see enclosed memo). You may expect to see those fees refunded within the next two weeks. I have enclosed the original forms you submitted with this letter.

Please let me know if you have any questions or concerns regarding the content of this letter. You may reach me at 208-334-2190, or by email at cody.parker@idwr.idaho.gov. Thank you for your time.

Respectfully,



Cody Parker
Water Resource Agent
IDWR Western Region
208.334.2190
cody.parker@idwr.idaho.gov

MEMORANDUM

TO: Sascha Marston
FROM: Cody Parker
DATE: December 8, 2017
RE: Refund for transfer application and ownership change

Cheryl Harvey paid \$325 for an application for transfer and notice of change in water right ownership on October 6, 2017. Both were withdrawn by the applicant by means of email on December 7, 2017 which reduced the required processing fee. A full refund should be issued.

Please issue a \$325 refund as follows:

TO

CHERYL A HARVEY
4233 ANTIQUITY WAY
MODESTO CA 95356

TEL. 209-480-7200

RECEIPT

Receipt nos.

W045723

W045724

W045725

Copy: App 81981 and Change in Ownership Form

State of Idaho

Dept. of Water Resources

Boise, Idaho

RECEIVED

OCT 06 2017

WATER RESOURCES
WESTERN REGION

Enclosed please find my application to make a change to my water rights. I own 3 parcels in New Plymouth, Idaho. Their respective addresses and parcel numbers are below.

1.	5807 SE 1 st Ave.	Township	Range	Section	¼ of ¼ of ¼	County
		07N	04W	12	NE SW	Payette
		Legal: TAX 7 IN NWSE SEC 12-7-4			PIN: 07N04W127810	

2. 5815 SE 1st Ave. Legal SEC 1 GOV LOT 1 S& W of Co RD Less S491.01' PIN: 07N04W127460

These two properties are right next door to each other.

3. 5808 SE 1st Ave. (THIS PROPERTY IS NOT ADDRESSED IN THIS DISCUSSION)

My Water right Claim No. 65-4891 B is good for 16 acres of water rights. I would like to take 2 or 3 of those rights and move to the property at 5815 SE 1st. I am selling the property at 5807 SE 1st and I am keeping the 5815 SE 1st property. To keep the value I will need to make this change.

If you have any questions regarding this or you need any additional information please contact me at 209-480-7200.

I have attached the following:

- Notice of Change in Water Rights ownership form
- Copy of the original paperwork from 5/23/2001 when Lee was got the shares.
- Lee's death certificate & Court documents showing Lee died & I own the property. (we have already gone through probate & the deed is now in my name).
- A plat map/aerial view showing where the right will move to
- My filing fee in two checks because I wasn't sure what amount needed to be paid.

These rights are NOT leased so there is no form for those.

Sincerely,

Cheryl Harvey

Since I am unsure of correct
forms I did 2
I have mailed 3 checks
Please use the appropriate
1 & mail others back or
VOID & throw away
Please disregard whichever
is incorrect. Thanks