

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

RECEIVED

AUG 14 2017

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?
84-7141	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: Melvin Konen
Name of current water right holder/claimant
3. New Owner(s)/Claimant(s): Konen Land, LLC, an Idaho limited liability company
New owner(s) as listed on the conveyance document Name connector ☐ and ☐ or ☐ and/or
- | | | | |
|----------------------------|------------------------------|-----------|--------------|
| <u>2635 Wildrose Drive</u> | <u>Moscow</u> | <u>ID</u> | <u>83843</u> |
| Mailing address | City | State | ZIP |
| <u>208-882-5547</u> | <u>ckonen@haydenross.com</u> | | |
| 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: January 26, 2017
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:  Member June 16 2017
 Signature of new owner/claimant Title, if applicable Date

Signature: _____ Title, if applicable Date

For IDWR Office Use Only:

Received by VC Date 8/14/17 Receipt No. C103902 Receipt Amt. \$25.00
 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  Date 11-1-17

Instrument # 231329

CLEARWATER COUNTY, OROFINO, IDAHO

7-14-2017 12:33:32 PM No. of Pages: 2

Recorded for : VOLK LAW*

CARRIE BIRD

Fee: 16.00

Ex-Officio Recorder Deputy

Index to DEED, QUIT-CLAIM

*Return to

231329

RECORDING REQUESTED BY AND
WHEN RECORDED RETURN TO:

Volk Law PLLC
Peter Volk
PO Box 9264
Moscow, ID 83843

(Space Above For Recorder's Use)

QUITCLAIM DEED

For the consideration of ten dollars (\$10.00) and other good and valuable consideration the receipt of which is hereby acknowledged **Cade L. Konen ("Grantor")**, does hereby release and forever quitclaim unto **Konen Land, LLC**, an Idaho limited liability company ("**Grantee**"), whose address is 2635 Wildrose Dr., Moscow, Idaho 83843 and its assigns forever, all right, title and interest which Grantor now has or may hereafter acquire in the following described real property situated in **Clearwater County, State of Idaho**, to-wit:

Township 36 North, Range 3 East, B.M.

Section 13: SW $\frac{1}{4}$ of the NE $\frac{1}{4}$, and S $\frac{1}{2}$ of the NW $\frac{1}{4}$, and NW $\frac{1}{4}$ of the SW $\frac{1}{4}$.

TO HAVE AND TO HOLD, all and singular the said real property, together with all appurtenances, tenements, hereditaments, reversions, remainders, rents, issues, profits, rights-of-way, and water rights and irrigation rights (IDWR Water Right # 84-7141) in anywise appertaining to the real property herein described, as well in law as in equity, unto Grantee, and to its heirs and assigns forever.

WITNESS the hand of said Grantor this 16th day of June 2017.



Cade L. Konen

STATE OF IDAHO)
) ss
County of Latah)

On this 15th day of June, 2017, before me, Peter A. Volk, a notary public in and for the said State, personally appeared **Cade L. Konen**, known to me to be the person whose name is subscribed to the within instrument, and acknowledged to me that he executed the same under no duress and after reviewing and understanding the contents and effect hereof.



Pete Volk

NOTARY PUBLIC in and for the State of Idaho
Residing at Viola, Idaho
My Comm. Expires: 13 April 2021

230933

TI

Instrument # 230933

CLEARWATER COUNTY, OROFINO, IDAHO

5-18-2017 10:55:32 AM No. of Pages: 2

Recorded for : VOLK LAW OFFICE

CARRIE BIRD

Fee: 13.00

Ex-Officio Recorder Deputy

Index to: DEED, QUIT-CLAIM

ECB
return

RECORDING REQUESTED BY AND
WHEN RECORDED RETURN TO:

Volk Law PLLC
Peter Volk
PO Box 9264
Moscow, ID 83843

(Space Above For Recorder's Use)

QUITCLAIM DEED

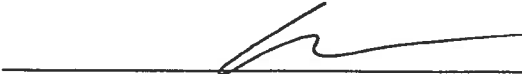
For the consideration of ten dollars (\$10.00) and other good and valuable consideration the receipt of which is hereby acknowledged **Konen Meadows, LLC**, an Idaho limited liability company ("**Grantor**"), does hereby release and forever quitclaim unto **Cade L. Konen** ("**Grantee**"), as his sole and separate property, whose address is 2635 Wildrose Dr., Moscow, Idaho 83843 and his heirs and assigns forever, all right, title and interest which Grantor now has or may hereafter acquire in the following described real property situated in **Clearwater County, State of Idaho**, to-wit:

Township 36 North, Range 3 East, B.M.

Section 13: SW $\frac{1}{4}$ of the NE $\frac{1}{4}$, and S $\frac{1}{2}$ of the NW $\frac{1}{4}$, and NW $\frac{1}{4}$ of the SW $\frac{1}{4}$.

TO HAVE AND TO HOLD, all and singular the said real property, together with all appurtenances, tenements, hereditaments, reversions, remainders, rents, issues, profits, rights-of-way, and water rights and irrigation rights (IDWR Water Right # 84-7141) in anywise appertaining to the real property herein described, as well in law as in equity, unto Grantee, and to its heirs and assigns forever.

WITNESS the hand of said Grantor this 26th day of January 2017.


Cade L. Konen

STATE OF IDAHO)
) ss
County of Latah)

On this 26th day of January, 2017, before me, Peter A. Volk, a notary public in and for the said State, personally appeared **Cade L. Konen**, known to me to be the person whose name is subscribed to the within instrument, and acknowledged to me that he executed the same under no duress and after reviewing and understanding the contents and effect hereof.



A handwritten signature in blue ink, appearing to read "Pete Volk", written over a horizontal line.

NOTARY PUBLIC in and for the State of Idaho
Residing at Viola, Idaho
My Comm. Expires: 13 April 2021

STATE OF IDAHO

CERTIFICATION OF VITAL RECORD

STATE OF IDAHO

IDAHO DEPARTMENT OF HEALTH AND WELFARE
BUREAU OF VITAL RECORDS AND HEALTH STATISTICS
State of Idaho
CERTIFICATE OF DEATH

ONLY A COPY OF THIS DOCUMENT, CERTIFIED BY THE STATE REGISTRAR WITH THE DEPARTMENT OF HEALTH AND WELFARE, SHALL BE USED AS PROOF OF DEATH. THIS DOCUMENT IS NOT VALID FOR ANY OTHER PURPOSE.

Local Reg. No. _____

DECEDENT TYPE OR PRINT IN PERMANENT BLACK INK. DO NOT USE FELTY TIP PEN. FOR INSTRUCTIONS SEE HANDBOOKS	1. DECEDENT'S LEGAL NAME (Include AKA's if any) (First, Middle, Last, Suffix) KENNETH MARVIN KONEN		2. SEX MALE	3. SOCIAL SECURITY NUMBER
	4a. AGE-Last Birthday 74 (Years)		5. DATE OF BIRTH (Mo/Da/Yr) 09/10/1942	
MORTICIAN: Complete/Verify and File Within 5 Days of Death	7a. RESIDENCE - STATE OR FOREIGN COUNTRY IDAHO		7b. COUNTY NEZ PERCE	
	7c. CITY OR TOWN JULIAETTA		7d. APT. NO. 7e. ZIP CODE 83636	
PARENTS	8. MARITAL STATUS AT TIME OF DEATH ☒ Married ☐ Married, but separated ☐ Widowed ☐ Divorced ☐ Never married ☐ Unknown		9. SURVIVING SPOUSE'S NAME (If wife, give maiden name) GRACE L. INGRAHAM	
	10. EVER IN U.S. ARMED FORCES? ☐ Yes ☒ No		11. BIRTHPLACE (State, Territory, or Foreign Country) IDAHO	
INFORMANT	12a. MOTHER'S MAIDEN NAME (First, Middle, Last, Suffix) ELIZABETH SCHEML		12b. BIRTHPLACE (State, Territory, or Foreign Country) WASHINGTON	
	13a. INFORMANT'S NAME (Type or print) GRACE L. KONEN		13b. RELATIONSHIP TO DECEDENT WIFE	
DISPOSITION	14. METHOD OF DISPOSITION ☐ Burial ☒ Cremation ☐ Donation ☐ Entombment ☐ Removal from Idaho ☐ Other (Specify)		15. PLACE OF DISPOSITION (Name and address of cemetery, crematory, or other place) WHEATLAND CREMATORY SOUTH 985 GRAND AVE PULLMAN, WASHINGTON 99183	
	16. NAME AND COMPLETE ADDRESS OF FUNERAL FACILITY SHORT'S FUNERAL CHAPEL 1225 EAST SIXTH STREET MOSCOW, IDAHO 83843		17a. SIGNATURE OF FUNERAL SERVICE LICENSEE OR PERSON ACTING AS SUCH ELECTRONICALLY FILED: DAVE L. HUTTON	
PLACE OF DEATH	17b. LICENSE NUMBER (Of licensee) M0651		18. WAS CORONER CONTACTED DUE TO CAUSE OF DEATH? ☒ Yes ☐ No	
	19a. IF DEATH OCCURRED IN A HOSPITAL: ☐ Inpatient ☒ Outpatient ☐ OOA ☐ Hospice, facility ☐ Nursing home/Long term care facility ☐ Decedent's home ☐ Other (Specify)			
DATE OF DEATH	20. FACILITY NAME (If not facility, give street and number) GRITMAN MEDICAL CENTER		21. CITY, TOWN, OR LOCATION OF DEATH, AND ZIP CODE MOSCOW, ID 83843	
	22. DATE OF DEATH (Mo/Da/Yr) (Spell month) November 22, 2016		23. TIME OF DEATH (24hr) 10:50	
CAUSE OF DEATH	24. DATE PRONOUNCED DEAD (Mo/Da/Yr) (Spell month) November 22, 2016		25. TIME PRONOUNCED DEAD (24hr) 10:50	
	26. CAUSE OF DEATH PART I. Enter the <u>chain of events</u> - 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. IMMEDIATE CAUSE (Final disease or condition resulting in death) a. PENETRATING HEAD WOUND DUE TO (or as a consequence of): b. GUN SHOT WOUND TO HEAD DUE TO (or as a consequence of): c. _____ DUE TO (or as a consequence of): d. _____ PART II. Enter other significant conditions contributing to death, but not relating to the underlying cause given in Part I. DEPRESSION BLADDER CANCER			
ITEMS 32-35 TO BE USED FOR EXTERNAL CAUSES ONLY (CORONER)	29. DID TOBACCO USE CONTRIBUTE TO DEATH? ☐ Yes ☐ Probably ☒ No ☐ Unknown		30. IF FEMALE (Aged 15-64): ☐ Not pregnant within past year ☐ Not pregnant, but pregnant 43 days to 1 year before death ☐ Pregnant at time of death ☐ Not pregnant, but pregnant within 42 days of death ☐ Unknown if pregnant within the past year	
	31. MANNER OF DEATH ☐ Natural ☐ Accident ☒ Suicide ☐ Homicide ☐ Pending investigation ☐ Could not be determined		32. DATE OF INJURY (Mo/Da/Yr) (Spell month) November 22, 2016	
CERTIFIER IF DEATH WAS DUE TO OTHER THAN NATURAL CAUSES, THE CORONER MUST COMPLETE AND SIGN THIS CERTIFICATE	33. TIME OF INJURY (24hr) Estimated 09:47 - 10:00		34. PLACE OF INJURY (Decedent's home, farm, street, construction site, nursing home, restaurant, bar, etc.) ROAD	
	35. INJURY AT WORK? ☐ Yes ☒ No		36. LOCATION OF INJURY: State IDAHO City/Town or County JULIAETTA, LATAH Zip Code 83636 Street and Number or Location W HUTCHINSON AMERICAN RD Apartment Number _____	
REGISTRAR	37. DESCRIBE HOW INJURY OCCURRED. IF TRANSPORTATION INJURY, STATE THE TYPE(S) OF VEHICLE(S) INVOLVED (Automobile, pickup, motorcycle, ATV, bicycle, etc.) SHOT SELF IN HEAD WITH 22 REVOLVER			
	38a. WAS DECEDENT: ☐ Driver/Operator ☐ Passenger ☐ Pedestrian ☐ Other (Specify)		38b. WHAT SAFETY DEVICES(S) DID DECEDENT USE/EMPLOY? ☐ Seat belt ☐ Child safety seat ☐ Helmet ☐ Air bag ☐ None ☐ Unknown	
CERTIFIER IF DEATH WAS DUE TO OTHER THAN NATURAL CAUSES, THE CORONER MUST COMPLETE AND SIGN THIS CERTIFICATE	39a. CERTIFIER (Check only one, based on official capacity for this certificate) ☐ PHYSICIAN ☐ PHYSICIAN ASSISTANT ☐ ADVANCED PRACTICE REGISTERED NURSE - To the best of my knowledge, death occurred at the time, date, and place, and due to the natural cause(s)/manner 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 stated. Signature and Title of Certifier ELECTRONICALLY SIGNED: CATHERINE M. MABBUTT		39b. LICENSE NUMBER 39c. DATE SIGNED 11 / 23 / 2016 MM DD YYYY	
	39d. NAME, ADDRESS, AND ZIP CODE OF CERTIFIER (Type or print) CATHERINE M. MABBUTT, 502 SOUTH JEFFERSON STREET MOSCOW, ID 83843		40a. REGISTRAR'S SIGNATURE <i>James B. Aydelotte</i>	
		40b. DATE SIGNED 11 / 25 / 2016 MM DD YYYY		

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 28, 2016

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

JAMES B. AYDELOTTE
STATE REGISTRAR

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

The Grantors Kenneth Marvin Konen and Grace L. Konen, husband and wife,

for and in consideration of the sum of One Dollar (\$1.00) and other valuable considerations, in hand paid, do hereby remise, release and quit claim unto

Konen Meadow's, LLC
An Idaho Limited Liability Company

* 27421 Gem Lane
Juliaetta, Idaho 83535-5001

the following described real estate situated in Clearwater County, Idaho:

The Southwest Quarter of the Northeast Quarter and the South half of the Northwest Quarter and the Northwest Quarter of the Southwest Quarter of Section 13, Township 36 North, Range 3, East B.M. Clearwater County, Idaho

Dated this 2 of JUNE, 2008

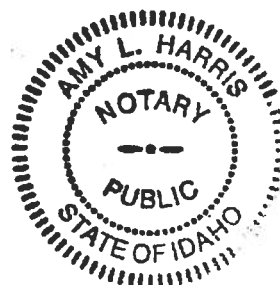
Kenneth Marvin Konen
Marvin Kenneth Konen
Kenneth Marvin
Grace L. Konen
Grace L. Konen

STATE OF IDAHO)
) ss.
COUNTY OF LATAH)

On this 2nd of June, 2008, before me, the undersigned, a Notary Public, in and for said state, personally appeared ~~Marvin~~ Kenneth ~~Konen~~ Konen and Grace L. Konen, known to me to be the persons whose names are subscribed to the foregoing instrument and acknowledged to me that they executed the same.

IN WITNESS WHEREOF, I have hereunto set my hand and notarial seal on the date last above written.

Amy L. Harris
Notary Public for: Idaho
Residing at: Latah County
My comm. expires: 7-1-09



174887

RECEPTION
INDEXED
FILMED
DELIVERED
MAILED

DEED OF GIFT

THIS INDENTURE made this 1st day of May, 1997, between MELVIN J. KONEN, a married man dealing with his sole and separate property, of Lewiston, Idaho, herein referred to as Donor, and MARVIN KENNETH KONEN of Rt. 1, Box 12A, Juliaetta, Idaho, 83535, dealing with his sole and separate property, hereinafter referred to as Donee;

WITNESSETH:

That the Donor, for and in consideration of his natural love and affection, does hereby give, grant, convey and confirm unto Donee, as his sole and separate property, his heirs and assigns forever, all the following described real property situate in Clearwater County, State of Idaho, to wit:

The South Half of the Northwest Quarter (S1/2 NW1/4), the Southwest Quarter of the Northeast Quarter (SW1/4 NE1/4) and the Northwest Quarter of the Southwest Quarter (NW1/4 SW1/4) of Section Thirteen (13), Township Thirty-Six (36) North, Range Three (3) East of the Boise Meridian; EXCEPTING all rights of way and easements of whatsoever kind and nature now of record or in use.

TOGETHER WITH all and singular, the tenements, hereditaments, appurtenances, and fixtures thereunto belonging or in anywise appertaining.

To have and to hold the same to the Donee, his heirs and assigns, forever RESERVING UNTO THE DONOR and his spouse Bertha M. Konen, a life estate interest in the above described real property during the terms of their joint and several lives, and the survivor of them to receive the net income from the property as Donor now receives as landlord from the current lease in effect, severally and jointly to themselves and to each of them the said income accruing out of said premises hereinabove conveyed, during the joint and several lives of the Donor and his spouse.

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

Melvin J. Konen
MELVIN J. KONEN

DEED OF GIFT --

L:\0307001\97A11737.2 nnp

Aherin, Rice & Anegón
ATTORNEYS AT LAW
LEWISTON, IDAHO

STATE OF IDAHO)

) ss.

COUNTY OF NEZ PERCE)

On this 1st day of May, 1997, before me, Stephen C. Rice, a notary public, personally appeared Melvin J. Kofen, to me known to be the person whose name is subscribed to the foregoing instrument, and acknowledged to me that he executed the same.

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



Stephen C. Rice
NOTARY PUBLIC for Idaho

Residing at Lewiston

My commission expires on 7-25-99

Filed and recorded at the request of Stephen Rice
at 2:30 o'clock P.M., this 3 day of May, 1997
By: Brian Chikman Deputy
Ex-Officio Auditor-Recorder
Blaine County, Idaho
Date 4.6.02

Return

DEED OF GIFT -- 2

L:\03070\01\97A11737.2 mp

Aherin, Rice & Ahagon

ATTORNEYS AT LAW
LEWISTON, IDAHO

83007

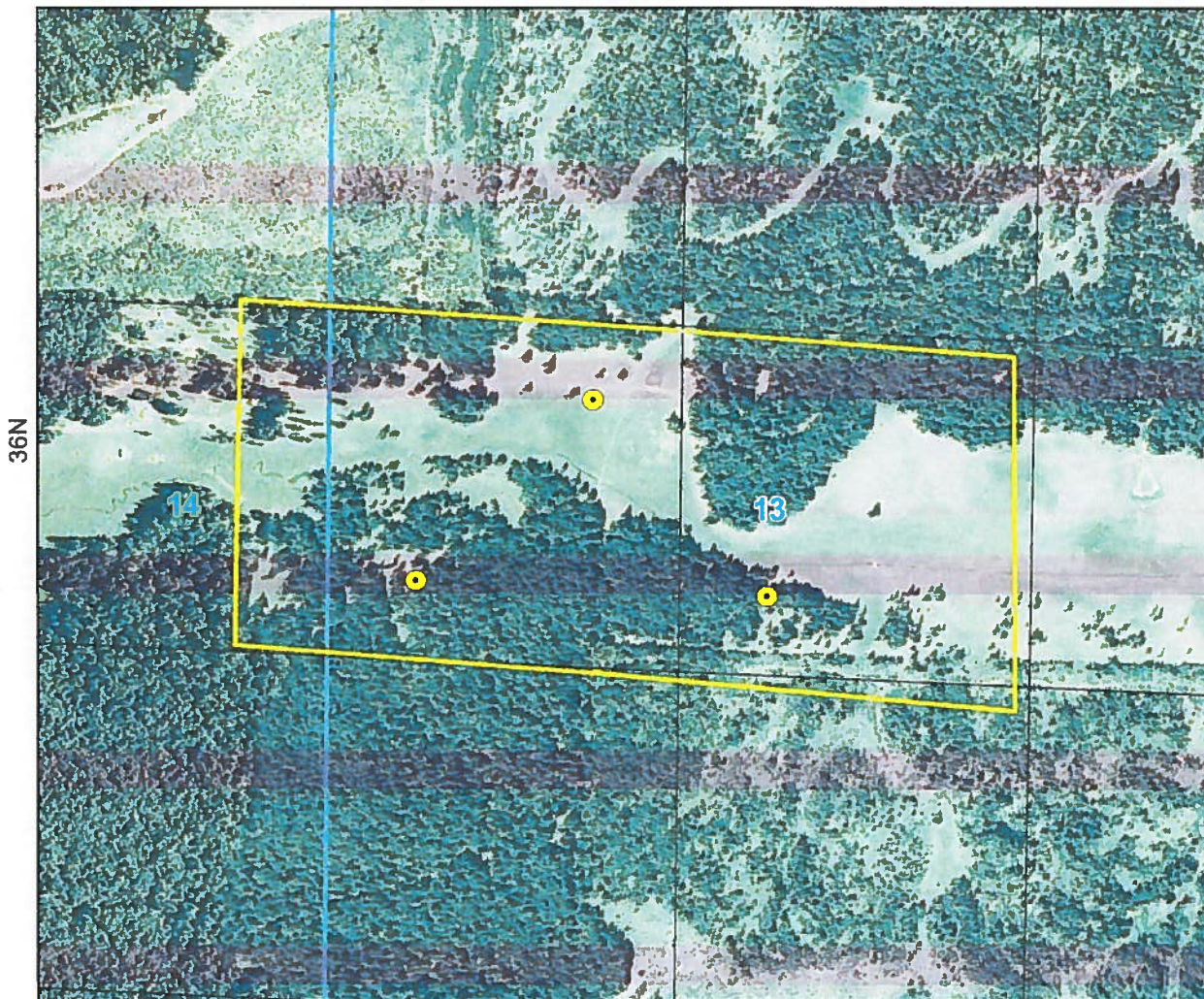
State of Idaho
Department of Water Resources

Water Right
84-7141

STOCKWATER

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 the computer representation and the permanent document file will be resolved in favor of the actual water right documents in the water right file.

03E



-  Point of Diversion
-  Place Of Use Boundary
-  Townships
-  PLS Sections
-  Quarter Quarters

0 0.075 0.15 0.3 Miles



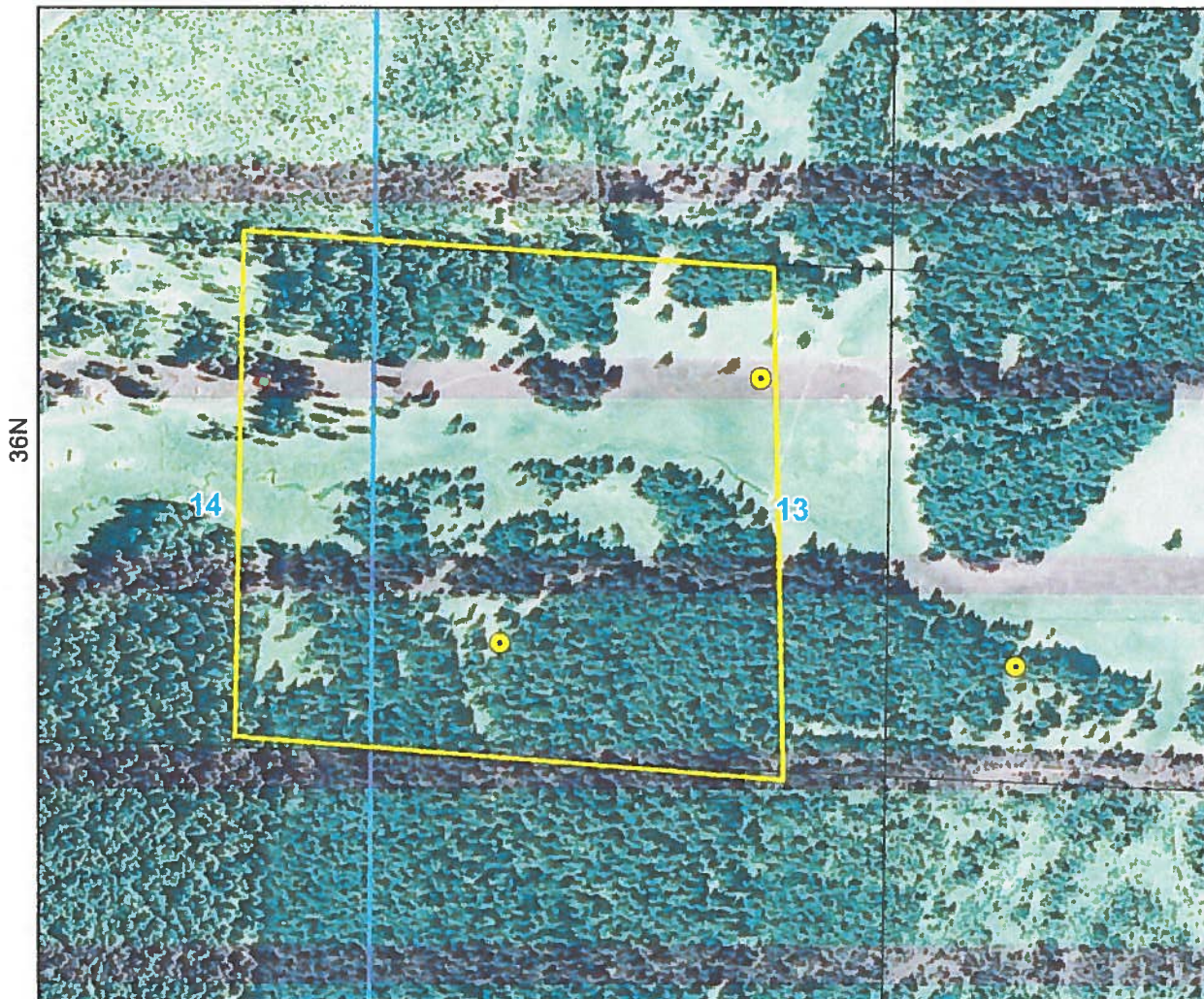
State of Idaho
Department of Water Resources

Water Right
84-7141

DOMESTIC

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 the computer representation and the permanent document file will be resolved in favor of the actual water right documents in the water right file.

03E



-  Point of Diversion
-  Place Of Use Boundary
-  Townships
-  PLS Sections
-  Quarter Quarters

0 0.05 0.1 0.2 Miles





State of Idaho

DEPARTMENT OF WATER RESOURCES

322 East Front Street • P.O. Box 83720 • Boise, Idaho 83720-0098

Phone: (208) 287-4800 • Fax: (208) 287-6700 • Web Site: www.idwr.idaho.gov

GARY SPACKMAN
Director

C.L. "BUTCH" OTTER
Governor

November 1, 2017

KONEN LAND LLC
2635 WILDROSE DR
MOSCOW ID 83843

Re: Change of Ownership for Water Right/Permit No(s): 84-7141

Dear Water Right Holder(s):

The Department acknowledges the receipt of correspondence changing ownership of the above referenced water right(s) to you. The Department has modified its records to reflect this change in ownership and has enclosed a computer-generated report for your records.

Updating the ownership record for a water right does not reconfirm the validity of the right. When processing an ownership change notice, the department does not review the history of water use to determine if the right has been forfeited 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 § 42-222 and §42-223, Idaho Code.

Also note that as of July 1, 1996, water right owners are required to report any change of water right ownership and any change of mailing address of the owner of a water right, to the Department. Notice of the change must be provided to the Department within **120 days** of the change. Water right forms are available from any office of the Department, or at www.idwr.idaho.gov.

If you have any questions concerning the enclosed information, please feel free to contact me at (208) 287-4942.

Sincerely,

A handwritten signature in cursive script that reads "Jean Hersley".

Jean Hersley
Technical Records Specialist II

Enclosure(s)

c: Volk Law, PLLC



State of Idaho

DEPARTMENT OF WATER RESOURCES

322 East Front Street • P.O. Box 83720 • Boise, Idaho 83720-0098

Phone: (208) 287-4800 • Fax: (208) 287-6700 • Website: www.idwr.idaho.gov

C.L. "BUTCH" OTTER
Governor

GARY SPACKMAN
Director

September 14, 2017

KONEN LAND, LLC
2635 WILDROSE DR
MOSCOW ID 83843

RE: Change of Ownership for Water Right No. 84-7141

Dear Konen Land, LLC:

The Department of Water Resources acknowledges receipt of your Notice of Change in Water Right Ownership for Water Right No. 84-7141.

Our review of your notice indicates that additional information is required before we can process the change. The information required is indicated below:

_____ Evidence of Water Right Ownership: copy of Deed, Title Policy, Contract of Sale, or other legal document indicating your ownership of the property and/or water rights in question.

Because the Department cannot process the ownership change without proper documentation we will hold any action on your notice pending receipt of the necessary information. If we do not receive the necessary information within 30 days of the date of this letter, we will return your notice and all attachments and your notice will not be processed.

Please note that water right owners are required to report any change in water right ownership and/or mailing address to the Department within 120 days of the change. Failure to report these changes could result in a \$100 late filing fee. Contact any office of the Department or visit the Department's homepage on the Internet to obtain the proper forms and instructions.

Please feel free to contact me at 208-287-4803 with any questions.

Sincerely,

Caitlin McCoy
Administrative Assistant

cc: Peter Volk

VOLK LAW, PLLC
PETER A. VOLK

P.O. Box 9264
Moscow, ID 83843

RECEIVED

AUG 14 2017

DEPARTMENT OF
WATER RESOURCES

August 9, 2017

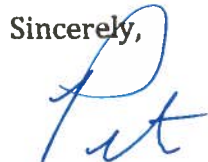
IDWR State Office
322 East Front ST 6th Floor
PO BOX 83720
BOISE, ID 83720-0098

RE: Water Rights Transfer for Konen Land, LLC

Enclosed please find notice of change in water right ownership, quit claim deed, map and \$25.00 fee.

If you have any questions please contact me. Thank you.

Sincerely,



Peter Volk

cc: To file