

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

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APR 16 2015

DEPT OF WATER RESOURCES
SOUTHERN REGION

CHANGE IN ADDRESS

This form can be used to notify the Department of a change in
address of the owners of record for the listed water rights.
(Please print or type)Water Right Number(s): all ^{Pd} 45-2279, ^{Pd} 45-2323A, ^{Pd} 45-14044, ^{Pd} 45-14046,Name(s): ^{Pd} 45-14048, 45-14050 & 45-14052 ^{Pd}
Keith P. Critchfield ^{Pd}Old Mailing Address: 1896 S. Hwy 27
Oakley, Idaho 83346New Mailing Address: c/o David Critchfield
1854 S. Hwy 27
Oakley, Idaho 83346

Telephone Number: (208)300-3414

Email: critchfieldd@gmail.com

Signature(s) of Owner(s) Keith Critchfield
David Critchfield Partner K+D Farms
(Include your title if on behalf of company or organization.)

Date: April 14, 2015

Send a signed original to your closest regional office:

IDWR Northern Region
7600 N. Mineral Dr., Suite 100
Coeur d'Alene, ID 83815-7763
(208) 762-2800IDWR Western Region
2735 Airport Way
Boise, ID 83705-5082
(208) 334-2190IDWR Eastern Region
900 N. Skyline Dr., Suite A
Idaho Falls, ID 83402-1718
(208) 525-7161IDWR Southern Region
650 Addison Ave W, Suite 500
Twin Falls, ID 83301-5858
(208) 736-3033

SUPPORT DATA

IN FILE # 45-2279

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CASSIA COUNTY
RECORDED FOR:
PARSONS, SMITH AND STONE
4:27:08 pm 09-10-2008
2008-005134
NO. PAGES: 3 FEE: \$9.00
LARRY A. NICKELSEN
COUNTY CLERK
DEPUTY: VIKI

GENERAL POWER OF ATTORNEY

1. **DESIGNATION OF AGENT:** I, **KEITH P. CRITCHFIELD**, name the following person as my agent:

Name of Agent: **DAVID K. CRITCHFIELD**
Agent's Address: 1854 S. Hwy. 27 Oakley, ID 83346
Agent's Phone Number: (208) 300-3414

2. **DESIGNATION OF SUCCESSOR AGENT(S):** If my agent is unable or unwilling to act for me, I name as my successor agent:

Name of Successor Agent: **G. WAYNE LIND**
Successor Agent's Address: 1653 S. 400 W., Oakley, ID 83346
Successor Agent's Phone Number: (208) 300-3362

If my successor agent is unable or unwilling to act for me, I name as my second successor agent:

Name of Second Successor Agent:
Second Successor Agent's Address:
Second Successor Agent's Phone Number:

3. **GRANT OF GENERAL AUTHORITY:** I grant my agent and any successor agent general authority to act for me with respect to the following subjects as defined in the Uniform Power of Attorney Act, Chapter 12, Title 15, Idaho Code:

<u> </u>	Real Property
<u> </u>	Tangible Personal Property
<u> </u>	Stocks and Bonds
<u> </u>	Commodities and Options
<u> </u>	Banks and Other Financial Institutions
<u> </u>	Operation of an Entity or Business
<u> </u>	Insurance and Annuities
<u> </u>	Estates, Trusts and Other Beneficial Interests
<u> </u>	Claims and Litigations
<u> </u>	Personal and Family Maintenance
<u> </u>	Benefits from Governmental Programs or Civil Military Service
<u> </u>	Retirement Plans
<u> </u>	Taxes
<u> X </u>	All Preceding Subjects

GENERAL POWER OF ATTORNEY - 1

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4. **GRANT OF SPECIFIC AUTHORITY:** My agent MAY NOT do any of the following specific acts for me UNLESS I have INITIALED the specific authority listed below:

- _____ Create, amend, revoke or terminate an inter vivos trust
- _____ Make a gift, subject to the limitations of the Uniform Power of Attorney Act, Chapter 12, Title 15, Idaho Code, and any special instructions in this Power of Attorney
- _____ Make a gift without limitations except any special instructions in this Power of Attorney
- _____ Create or change rights of survivorship
- _____ Create or change a beneficiary designation
- _____ Authorize another person to exercise the authority granted under this Power of Attorney
- _____ Waive the principal's right to be a beneficiary of a joint and survivor annuity, including a survivor benefit under a retirement plan
- _____ Exercise fiduciary powers that the principal has authority to delegate

5. **LIMITATION OF AGENT'S AUTHORITY:** An agent that is not my ancestor, spouse, or descendant MAY NOT use my property to benefit the agent or a person to whom the agent owes an obligation of support unless I have included that authority in the Special Instructions.

6. **SPECIAL INSTRUCTIONS:** I give my agent these special instructions:

None

7. **EFFECTIVE DATE:** This Power of Attorney is effective immediately unless I have stated otherwise in the Special Instructions.

8. **NOMINATION OF CONSERVATOR:** If it becomes necessary for a court to appoint a conservator of my estate, I nominate the following person(s) for appointment:

Name of Nominee for conservator of my estate: **DAVID K. CRITCHFIELD**
Nominee's Address: 1854 S. Hwy. 27, Oakley, ID 83346
Nominee's Phone Number: (208) 300-3414

9. **RELIANCE ON THIS POWER OF ATTORNEY:** Any person, including my agent, may rely upon the validity of this Power of Attorney or a copy of it unless that person knows it is terminated or invalid.

Signature: Keith Critchfield
Date: August 15, 2008
Your Name Printed: Keith P. Critchfield
Your Address: 1896 S. Hwy. 27, Oakley, ID 83346
Your Phone Number: (208) 862-3687

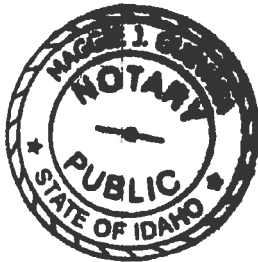
GENERAL POWER OF ATTORNEY - 2

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APR 17 2015

STATE OF IDAHO)
) ss.
Count of Cassia)

On this 4th day of September, in the year 2008, before me, the undersigned, a Notary Public in and for said State, personally appeared **KEITH P. CRITCHFIELD**, known or identified to me to be the person who executed the said instrument, and acknowledged to me that he/she execute the same.



Maggie J. Guerra
Notary Public for Idaho
Residing at: Rupert ID 83356
Comm. Exp.: June 2 2014

State of Idaho }
County of Cassia } ss

I hereby certify that the foregoing instrument is a full, true and correct copy of the original as recorded in this office.

Dated 9-23-2008
Randy Alford
Clerk of the District Court, Ex-officio Auditor
and Recorder, Cassia County, Idaho
By Eric S. Whitcomb
Deputy

(CritchfieldKeith\KeithGPOA.doc)

GENERAL POWER OF ATTORNEY - 3

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APR 17 2015