

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

RECEIVED

NOV 18 2013

Notice of Change in Water Right Ownership

DEPT. OF WATER RESOURCES
SOUTHERN 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.

Water Right/Claim No.	Split?	Water Right/Claim No.	Split?	Water Right/Claim No.	Split?
37-08270	Yes ☐		Yes ☐		Yes ☐
37-042449A	Yes ☐		Yes ☐		Yes ☐
47-4154	Yes ☐		Yes ☐		Yes ☐
47-10021	Yes ☐		Yes ☐		Yes ☐
	Yes ☐		Yes ☐		Yes ☐

2. Previous Owner's Name: Mayme M Ruffing

Name of current water right holder/claimant

3. New Owner(s)/Claimant(s): John E Ruffing

New owner(s) as listed on the conveyance document Name connector ☐ and ☐ or ☐ and/or

1638 East 17th Place

Tulsa

ok

74120-7204

Mailing address

City

State

ZIP

918-851-0913

John_ruffing@sbcglobal.net

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: _____

6. If the water right described herein has been rented from the Water Supply Bank, rental proceeds will be disbursed in the following manner regardless of any arrangements between the buyer(s) and seller(s) to the contrary:

- Rental payments will go to the lessor(s) of record at the beginning of the rental season.
- If a change in ownership is processed by the Department during a rental season, rental payment will be made to the person or entity who is the lessor of record at the beginning of that rental season.
- New lessor(s) of record will receive payment after the following rental season.

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.

8. Signature: 

Signature of new owner/claimant

Title, if applicable

Date 11/18/13

Signature: _____

Signature of new owner/claimant

Title, if applicable

Date

For IDWR Office Use Only:

Received by DM

Date

11-18-2013

Receipt No.

5033643

Receipt Amt.

\$100-

Approved by _____

Processed by _____

Date _____

SUPPORT DATA

IN FILE # 47-4154

CERTIFICATE OF VITAL RECORD

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

Date Filed JULY 18, 2002

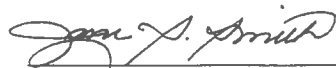
State File No. 2002-05068

DECEDENT - NAME BERNARD J. RUFFING				AGE 85 YEARS	
DATE OF DEATH JUNE 24, 2002		SEX MALE	SOCIAL SECURITY NUMBER [REDACTED]	DATE OF BIRTH MAY 05, 1917	BIRTHPLACE NEBRASKA
WAS DECEDENT EVER IN U.S. ARMED FORCES? NO	MARITAL STATUS MARRIED		SURVIVING SPOUSE (if wife, maiden name) MAYME MCNELLY		CITY, TOWN OR LOCATION OF DEATH BOISE, IDAHO
RESIDENCE STATE IDAHO		CITY, TOWN OR LOCATION TWIN FALLS			
FATHER - NAME BERNARD RUFFING					BIRTHPLACE NEBRASKA
MOTHER - FULL MAIDEN NAME MARIE BRACHMAN					BIRTHPLACE UNKNOWN
NAME AND ADDRESS OF MORTUARY WHITE MORTUARY, INC., TWIN FALLS, IDAHO					
FUNERAL SERVICE LICENSEE KEVIN L. ROSENAU					
METHOD OF DISPOSITION BURIAL		TIME OF DEATH 7:00 P.M.		MANNER OF DEATH ACCIDENT	
CAUSE OF DEATH (underlying cause last) a. BLUNT FORCE TRAUMA OF THE HEAD					Approximate Interval Between Onset and Death -
DUE TO (or as a consequence of): b. MOTOR VEHICLE ACCIDENT					
DUE TO (or as a consequence of): c.					
DUE TO (or as a consequence of): d.					
OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH but not resulting in the underlying cause given above NONE LISTED					AUTOPSY PERFORMED? NO
NAME OF CERTIFIER GLEN R. GROBEN				TITLE OF CERTIFIER CORONER	
CORONER REVIEW AREA					
ACTION			NAME		
EXTERNAL CAUSES ONLY					
DATE OF INJURY JUNE 23, 2002		HOUR OF INJURY 2:00 P.M.			INJURY AT WORK? NO
DESCRIPTION OF HOW INJURY OCCURRED DRIVER OF A 1994 BUICK LASABRE IN COLLISION WITH A 1998 DODGE RAM TRUCK					
PLACE OF INJURY ROAD		LOCATION OF INJURY 1600 E 4500 N, TWIN FALLS, IDAHO			

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: JULY 25, 2002

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


JANE S. SMITH
STATE REGISTRAR



QUIT CLAIM DEED

THIS QUITCLAIM DEED, made this 18 day of November, 2013
between Mayme M Ruffing, a single person (referred to herein as "Grantor" whether one
or more), and John E Ruffing (referred to herein as "Grantee" whether one or more).

WITNESSETH, that said Grantor, in consideration of the sum of TEN AND
00/100 DOLLARS, and other good and valuable consideration, the receipt of which is
hereby acknowledged, does hereby quit claim, grant, bargain, sell and convey unto said
Grantee, his successors and assigns, forever, all right, title, interest, and estate, both at
law and in equity of the following described water rights:

Water Right/Spring Claim Number 37-08270,
Water Right/Spring Claim Number 37-0424 9A ,
Water Right/Spring Claim Number 47-4154
Water Right/Spring Claim 47-10021

To have and to hold the above granted water rights unto the said Grantee, Her successors
and assigns forever.

SIGNED AND DELIVERED the date first above written.

IN WITNESS WHEREOF, The said first party has signed
and sealed these presents the day and year first above written. Signed, sealed and
delivered in presence of:
Signature of Witness

Print Name of Witness: Paul N S Atkins IV

Signature of First Party:

Print Name of First Party: Mayme M Ruffing

Signature of Second Party:

Print Name of Second Party: John E Ruffing

On 11/18/13 before me, Mayme M Ruffing and John E Ruffing, appeared
personally known to me (or proved to me on the basis of satisfactory evidence) to be the
person(s) whose name(s) is/are subscribed to the within instrument and acknowledged
to me that he/she/they executed the same in his/her/their authorized capacity(ies), and
that by his/her/their signature(s) on the instrument the person(s), or the entity upon
behalf of which the person(s) acted, executed the instrument. WITNESS my hand and
official seal.

Signature of Notary:

Affiant

Known

Produced ID

Type of ID: Notary License
(Seal)

