

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

RECEIVED

NOV 30 2012

WATER RESOURCES
WESTERN 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.

Water Right/Claim No.	Split?	Water Right/Claim No.	Split?	Water Right/Claim No.	Split?
PD 63-08695	Yes ☒	63-8695 63-33844	Yes ☐		Yes ☐
PD 63-00161AJ	Yes ☐		Yes ☐		Yes ☐
PD 63-00120H	Yes ☐		Yes ☐		Yes ☐
	Yes ☐		Yes ☐		Yes ☐
	Yes ☐		Yes ☐		Yes ☐

2. Previous Owner's Name: LaWana L. Niemann
Name of current water right holder/claimant

3. New Owner(s)/Claimant(s): Pamela Niemann Geile
Name of each new owner as listed on the conveyance document

Paula Niemann Riggs
New owner continued ☒ Name connector ☒ and ☐ or ☐ and/or

4399 N Meridian Rd
Mailing address

Meridian ID 83646
City State ZIP

208-859-7182 pgeile@yahoo.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: 1/20/12 & 11/8/12

6. 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.

7. Signature: Pamela Niemann Geile 11/27/12
Signature of new owner/claimant Title, if applicable Date

Signature: Paula Niemann Riggs 11-27-12
Signature of new owner/claimant Title, if applicable Date

For IDWR Office Use Only:

Received by RS Date 11-30-12 Receipt No. W040737 Receipt Amt. 75

Approved by _____ Processed by [Signature] Date 8-30-13

SUPPORT DATA

IN FILE # 63-120H

BOISE IDAHO 01/27/12 10:27 AM

DEPUTY Gail Garrett

RECORDED - REQUEST OF

Batt Fisher Pusch



112008076

GIFT DEED

FOR NO VALUE RECEIVED LaWana White Niemann ("Grantor") hereby conveys, releases and forever gifts unto Pamela Niemann Geile and Paula Niemann Riggs ("Grantees") an undivided one-half (1/2) interest each, as tenants-in-common, and each as their sole and separate property, together with all income, rents, profits, issues, interest, and dividends which may from time to time accrue each to her separate property, whose current collective address is 4399 N. Meridian Road, Meridian, Idaho, 83646, the property commonly known as 4273 N. Meridian Road, Meridian, Idaho 83646, and more particularly described as follows:

The Southeast 1/4, Northeast 1/4, excepting therefrom the South 285' and excepting therefrom the North 250' of Section 36, Township 4 North, Range 1 West, Boise Meridian, Ada County, Idaho.

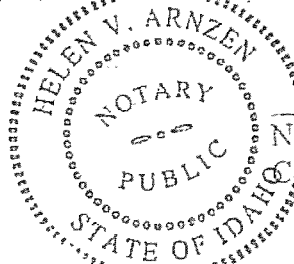
Together with appurtenances pertaining thereto.

LaWana White Niemann
LaWana White Niemann

1/26/2012
Date

[illegible]

On this 26 day of January, 2012, before me a Notary Public in and for said State, personally appeared LaWana White Niemann, known or proved to me to be the person whose name is subscribed to the within instrument, and acknowledged to me that she executed the same.



Helen V. Arzon
Notary Public for Idaho
Commission Expires: 1/24/2015



PERSONAL REPRESENTATIVE DEED

THIS DEED, made by Pamela N Geile as Personal Representative of the Estate of LaWana L Niemann, deceased, Grantor, to Pamela Niemann Geile & Paula Niemann Riggs, Grantees whose address is 4399 N Meridian Rd, Meridian ID 83646

WHEREAS, Grantor is the qualified Personal Representative of said Estate(s), filed as Case No. CV 1E 1212897 in the District Court of the Fourth Judicial District, Ada County, Idaho

THEREFORE, for valuable consideration received, Grantor quitclaims, transfers, and conveys to Grantee the following described real property in Ada County, Idaho,

S 285 FT OF SEANE4 SEC 36 4N 1W

Parcel # S0436142200

with all appurtenances.

Subject to all easements, restrictions and covenants of record.

Date NOV 8, 2012

Signature, Grantor as
Personal Representative of the Estate of
LaWana L Niemann, deceased

STATE OF IDAHO)
) ss.
County of ADA)

On this 8 day of NOVEMBER, 2012, before me, the undersigned, a Notary Public in and for said State, personally appeared PAMELA N GEILE, Personal Representative for LaWana L Niemann, deceased, and known to me to be the person whose name is subscribed to the within instrument, and acknowledged to me that s/he executed the same as such Personal Representative.



NOTARY PUBLIC for Idaho
Residing at: Meridian
My Commission Expires: 5-26-2017

STATE OF IDAHO

CERTIFICATION OF VITAL RECORD

STATE OF IDAHO

IDAHO DEPARTMENT OF HEALTH AND WELFARE
BUREAU OF VITAL RECORDS AND HEALTH STATISTICS

DATE FILED BY STATE REGISTRAR:

State of Idaho

CERTIFICATE OF DEATH

STATE FILE NO. 2012-05619

06/27/2012

ONLY A COPY OF THIS DOCUMENT, CERTIFIED BY THE STATE REGISTRAR WITH THE DEPARTMENT OF HEALTH AND WELFARE, RAISED SEAL, SHALL BE USED AS PRIMA FACIE EVIDENCE OF THIS DEATH UNDER §19-274, IDAHO CODE. Local Reg. No.

DECEASED TYPE OR PRINT IN PERMANENT BLACK INK. DO NOT USE FELT TIP PEN. FOR INSTRUCTIONS SEE HANDBOOKS	1. DECEDENT'S LEGAL NAME (include AKA's if any) (First, Middle, Last, Suffix) LAWANA LOUISE NIEMANN		2. SEX FEMALE		3. SOCIAL SECURITY NUMBER [REDACTED]	
	4a. AGE-Last Birthday 79 (Years)		4b. UNDER 1 YEAR Months: _____ Days: _____ Hours: _____ Minutes: _____		5. DATE OF BIRTH (Mo/Day/Yr) 02/07/1933	
	6. BIRTHPLACE (City and State, Territory, or Foreign Country) BOISE, IDAHO					
	7a. RESIDENCE - STATE OR FOREIGN COUNTRY IDAHO		7b. COUNTY ADA		7c. CITY OR TOWN MERIDIAN	
PARENTS FOR INSTRUCTIONS SEE HANDBOOKS	7d. STREET AND NUMBER 4015 N. MERIDIAN ROAD		7e. APT. NO. 83646		7f. ZIP CODE 83646	
	7g. INSIDE CITY LIMITS? ☐ Yes ☒ No					
	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)			
	10. EVER IN U.S. ARMED FORCES? ☐ Yes ☒ No		11a. FATHER'S NAME (First, Middle, Last, Suffix) F.M. WHITE		11b. BIRTHPLACE (State, Territory, or Foreign Country) IDAHO	
INFORMANT FOR INSTRUCTIONS SEE HANDBOOKS	12a. MOTHER'S MAIDEN NAME (First, Middle, Last, Suffix) VERA WANDA KLINGAMAN		12b. BIRTHPLACE (State, Territory, or Foreign Country) NEBRASKA			
	13a. INFORMANT'S NAME (Type or print) PAM GEILE		13b. RELATIONSHIP TO DECEDENT DAUGHTER		13c. MAILING ADDRESS (Street and Number, City, State, Zip Code) 4399 N. MERIDIAN ROAD MERIDIAN, ID 83646	
	14. METHOD OF DISPOSITION ☐ Burial ☒ Cremation ☐ Donation ☐ Entombment ☐ Removal from Idaho ☐ Other (Specify)		15. PLACE OF DISPOSITION (Name and address of cemetery, crematory, other place) MOUNTAIN VIEW CREMATORY 8209 FAIRVIEW AVENUE BOISE, IDAHO 83704		16. NAME AND COMPLETE ADDRESS OF FUNERAL FACILITY ACCENT FUNERAL HOME 1303 NORTH MAIN STREET MERIDIAN, IDAHO 83642	
	17a. SIGNATURE OF FUNERAL SERVICE LICENSEE OR PERSON ACTING AS SUCH ELECTRONICALLY FILED: RANDY J. ARNZEN		17b. LICENSE NUMBER (Of licensee) M0745		18. WAS CORONER CONTACTED DUE TO CAUSE OF DEATH? ☒ Yes ☐ No	
PLACE OF DEATH DATE OF DEATH CAUSE OF DEATH X67	19a. IF DEATH OCCURRED IN A HOSPITAL: ☐ Inpatient ☐ ER/Outpatient ☐ DOA ☐ Hospice facility ☐ Nursing home/Long term care facility ☐ Decedent's home ☐ Other (Specify)		19b. IF DEATH OCCURRED SOMEWHERE OTHER THAN A HOSPITAL:			
	20. FACILITY NAME (if not facility, give street and number) 4015 N. MERIDIAN ROAD		21. CITY, TOWN, OR LOCATION OF DEATH, AND ZIP CODE MERIDIAN, ID 83646		22. COUNTY OF DEATH ADA	
	23. DATE OF DEATH (Mo/Day/Yr) (Spell month) Estimated 06/23/2012 - 06/24/2012		24. TIME OF DEATH (24hr) Estimated 00:01 - 23:59		25. DATE PRONOUNCED DEAD (Mo/Day/Yr) (Spell month) June 25, 2012	
	26. TIME PRONOUNCED DEAD (24hr) 14:52					
CERTIFIER IF DEATH WAS DUE TO OTHER THAN NATURAL CAUSES, THE CORONER MUST COMPLETE AND SIGN THE CERTIFICATE	27. CAUSE OF DEATH PART I. Enter the chain of events - 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: ACUTE CARBON MONOXIDE POISONING DUE TO (or as a consequence of): INHALATION OF CAR EXHAUST DUE TO (or as a consequence of): INHALED CAR EXHAUST DUE TO (or as a consequence of):		Approximate Interval: Onset to Death			
	PART II. Enter other significant conditions contributing to death but not resulting in the underlying cause given in Part I		28a. WAS AN AUTOPSY PERFORMED? ☐ Yes ☒ No			
	29. DID TOBACCO USE CONTRIBUTE TO DEATH? ☐ Yes ☐ Probably ☒ No ☐ Unknown		30. IF FEMALE (Aged 10-54): ☐ 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		28b. WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE THE CAUSE OF DEATH? ☐ Yes ☒ No	
	31. MANNER OF DEATH ☐ Natural ☐ Accident ☒ Suicide ☐ Homicide ☐ Pending investigation ☐ Could not be determined					
ITEMS 32-38 TO BE USED FOR EXTERNAL CAUSES ONLY (CORONER)	32. DATE OF INJURY (Mo/Day/Yr) (Spell month) Estimated 06/23/2012 - 06/24/2012		33. TIME OF INJURY (24hr) Estimated 00:01 - 23:59		34. PLACE OF INJURY (Decedent's home, farm, street, construction site, nursing home, restaurant, forest, etc.) HOME	
	35. INJURY AT WORK? ☐ Yes ☒ No					
	36. LOCATION OF INJURY: State IDAHO City/Town or County MERIDIAN, ADA Zip Code 83642					
	Street and Number or Location 4015 N MERIDIAN 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.) INHALED CAR EXHAUST		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					
	39a. CERTIFIER (Check only one, based on official capacity for this certificate) ☐ PHYSICIAN ☐ PHYSICIAN ASSISTANT ☐ ADVANCED PRACTICE PROFESSIONAL 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: GLEN R. GROBEN, M.D.		39b. LICENSE NUMBER 39c. DATE SIGNED 6 / 26 / 2012 MM DD YYYY			
	39d. NAME, ADDRESS, AND ZIP CODE OF CERTIFIER (Type or print) GLEN R. GROBEN, 5550 MORRIS HILL ROAD BOISE, ID 83706					
40a. REGISTRAR'S SIGNATURE <i>James B. Aydelotte</i>		40b. DATE SIGNED 6 / 27 / 2012 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:

JUN 27 2012

JAMES B. AYDELOTTE

This copy not valid unless prepared on engraved border

NO. _____
A.M. _____ P.M. _____

JUL 25 2012

CHRISTOPHER D. RICH, Clerk
By ROSE WRIGHT
DEPUTY

1 WILLIAM D. COLLINS

Idaho State Bar No. 1054

2 WESTBERG, McCABE & COLLINS, CTD.

ATTORNEYS & COUNSELORS AT LAW

3 516 WEST FRANKLIN STREET

P.O. BOX 2836

4 BOISE, IDAHO 83701-2836

FACSIMILE: (208) 336-2121

5 TELEPHONE: (208) 336-5200

6 ATTORNEYS FOR PETITIONER

7 IN THE DISTRICT COURT OF THE FOURTH JUDICIAL DISTRICT

8 OF THE STATE OF IDAHO, IN AND FOR THE COUNTY OF ADA

9
10 In the Matter of the Estate of)

Case No. EV IE 1212897

11 LaWANA L. NIEMANN, a/k/a)

LETTERS TESTAMENTARY

12 LaWANA LOUISE NIEMANN,)

13 Deceased.)

(I.C. 15-3-602 and 15-3-702)

14
15
16 Pamela N. Geile, a/k/a Pamela Niemann Geile is hereby appointed personal representative
17 of the estate of LaWana L. Niemann, a/k/a LaWana Louise Niemann, deceased, without bond but
with all authority pertaining thereto. Administration of the estate is unsupervised.

18 These letters are issued to evidence the appointment, qualification and authority of the
19 personal representative.

20 WITNESS: Christopher M. Bieter, Magistrate of District Court, County of Ada, State of
Idaho, with the seal of the Court affixed the 24 day of July, 2012.

21
22 PATRICIA G YOUNG

23
STATE OF IDAHO
Magistrate of ADA SS

Christopher M. Bieter, Magistrate of District Court, County of Ada, State of Idaho, with the seal of the Court affixed the 24 day of July, 2012.

I, CHRISTOPHER D. RICH, Clerk of the District Court of the Fourth Judicial District of the State of Idaho, in and for the County of Ada, do hereby certify that the foregoing is a true and correct copy of the original on file in this office. In witness whereof, I have hereunto set my hand and affixed my official seal this 25 day of July, 2012.



[Print](#) - [Close Window](#)

Subject: Map of T 2838 Fay White Farm
Date: Thu, 15 Mar 2007 14:43:34 -0600
From: "Watkins, Pat - Meridian, ID" <pat.watkins@id.usda.gov>
To: pgeile@yahoo.com

Pam

I hope this will work for you

The ground is located in Section 36 Township 3 North Range 1 West

Pat Watkins, Program Technician
Ada County Farm Service Agency
132 S. W. 5th Avenue
Meridian, ID 83642
(208) 888-1890 Ext. 105
(208) 288-2874 FAX

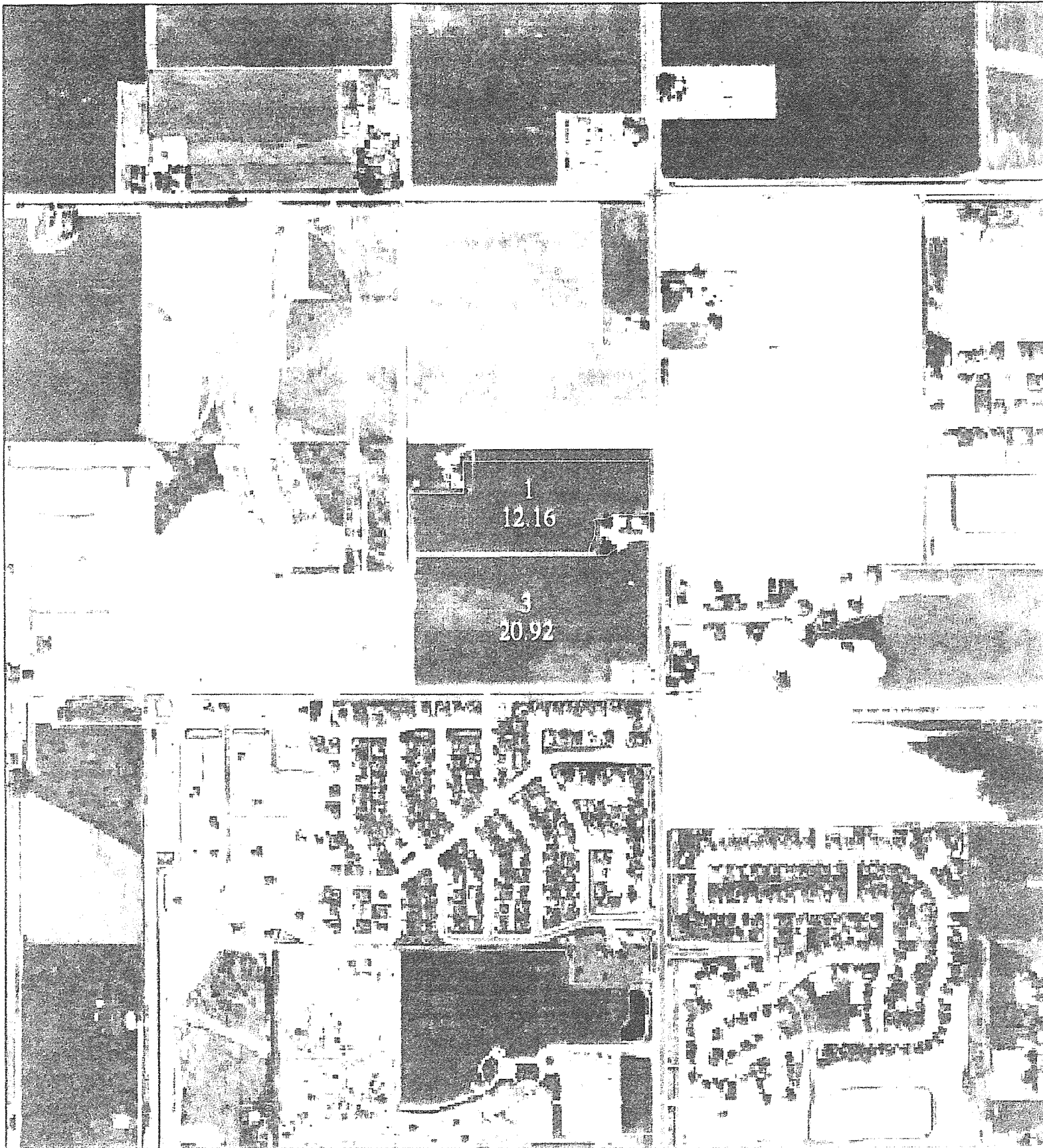
Attachments

Photos:



[t2838.jpg](#) (2.5MB) [[View](#)]

[Save All to Yahoo! Photos](#)



1:7,920

Prepared by FSA

Date: March 06, 2006

FIELDS

Tract: 2838



[Close](#)IDAHO DEPARTMENT OF WATER RESOURCES
Water Right Report

1/17/2013

WATER RIGHT NO. 63-8695

<u>Owner Type</u>	<u>Name and Address</u>
Current Owner	FAY M WHITE
Current Owner	WANDA WHITE
	4015 N MERIDIAN RD
	MERIDIAN, ID 83642

My Proof

Priority Date: 04/18/1977

Basis: Decreed

Status: Active

<u>Source</u>	<u>Tributary</u>
GROUND WATER	

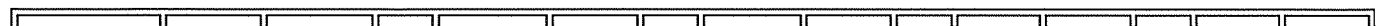
<u>Beneficial Use</u>	<u>From</u>	<u>To</u>	<u>Diversion Rate</u>	<u>Volume</u>
IRRIGATION	03/15	11/15	1.34 CFS	319.5 AFA
Total Diversion			1.34 CFS	

Location of Point(s) of Diversion:

GROUND WATER	SENE	Sec. 36	Township 04N	Range 01W	ADA County
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Place(s) of use:

Place of Use Legal Description: IRRIGATION ADA County



Township	Range	Section	Lot	Tract	Acres	Lot	Tract	Acres	Lot	Tract	Acres	Lot	Tract	Acres
04N	01E	31	2	SWNW	15		SENW	19		34	20/8			
	01W	36		SENE	37									

Total Acres: 71

Conditions of Approval:

1.	C18	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.
2.	W54	Use of this right is combined with water from Settlers Irrigation District.
3.	C05	RIGHT INCLUDES ACCOMPLISHED CHANGE IN PLACE OF USE PURSUANT TO SECTION 42-1425, IDAHO CODE.
4.	E52	USE OF THIS RIGHT WITH RIGHTS LISTED BELOW IS LIMITED TO A TOTAL COMBINED DIVERSION RATE OF 1.42 CFS. COMBINED RIGHT NOS.: 63-120H & 63-161AJ.
5.	S39	THE USE OF WATER FOR IRRIGATION UNDER THIS RIGHT MAY BEGIN AS EARLY AS MARCH 1, PROVIDED OTHER ELEMENTS OF THE RIGHT ARE NOT EXCEEDED. THE USE OF WATER BEFORE MARCH 15 UNDER THIS REMARK IS SUBORDINATE TO ALL WATER RIGHTS HAVING NO SUBORDINATED EARLY IRRIGATION USE AND A PRIORITY DATE EARLIER THAN THE DATE A PARTIAL DECREE IS ENTERED FOR THIS RIGHT.
6.	E56	USE OF THIS RIGHT WITH THE RIGHTS LISTED BELOW IS LIMITED TO THE IRRIGATION OF A COMBINED TOTAL OF 71 ACRES IN A SINGLE IRRIGATION SEASON. COMBINED RIGHT NOS.: 63-120H & 63-161AJ.

Dates:

Licensed Date:

Decreed Date: 02/16/2007

Permit Proof Due Date: 7/1/1982

Permit Proof Made Date: 1/1/1900

Permit Approved Date: 7/12/1977

Permit Moratorium Expiration Date:

Enlargement Use Priority Date:

Enlargement Statute Priority Date:

Water Supply Bank Enrollment Date Accepted:

Water Supply Bank Enrollment Date Removed:

Application Received Date:

Protest Deadline Date:

Number of Protests: 0

Other Information:

State or Federal: S

Owner Name Connector: AND
Water District Number:
Generic Max Rate per Acre:
Generic Max Volume per Acre:
Combined Acres Limit: 71
Combined Volume Limit:
Combined Rate Limit: 1.42
Civil Case Number:
Old Case Number:
Decree Plaintiff:
Decree Defendant:
Swan Falls Trust or Nontrust:
Swan Falls Dismissed:
DLE Act Number:
Cary Act Number:
Mitigation Plan: False

Close