

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

RECEIVED
JAN 11 2012
DEPT. OF WATER RESOURCES
SOUTHERN 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?
37-509	Yes ☐		Yes ☐		Yes ☐
37-8098	Yes ☐		Yes ☐		Yes ☐
	Yes ☐		Yes ☐		Yes ☐
	Yes ☐		Yes ☐		Yes ☐
	Yes ☐		Yes ☐		Yes ☐

2. Previous Owner's Name: R. Daniel Olmstead Revocable Trust and John D. Pierce

Name of current water right holder/claimant

3. New Owner(s)/Claimant(s): Sagebrush Equine Training Center for the Handicapped

Name of each new owner as listed on the conveyance document

New owner continued Name connector ☐ and ☐ or ☐ and/or

114 Calypso Lane

Mailing address

Bellevue

Idaho

83313

City

State

ZIP

(208) 578-9111

Sagebrushequine.org

Telephone

Email

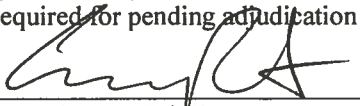
4. If the water rights and/or adjudication claims were split, how did the division occur?

- ☐ 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: December 15, 2011

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: 

Signature of new owner/claimant

Treasurer

Title, if applicable

January 9, 2012

Date

Signature: SCOTT PORTER

Signature of new owner/claimant

Title, if applicable

Date

For IDWR Office Use Only:

Received by 

Date 1/13/12

Receipt No. 5032309

Receipt Amt. \$25.00

Approved by _____

Processed by _____

Date _____

1/11/12 5032306 - 2500

QUITCLAIM DEED

THIS INDENTURE, made this ____ day of December, 2011, between

R. Daniel Olmstead Jr., as Trustee of The R. Daniel Olmstead Revocable Trust, as to an undivided 67.1429% and Peter Hitch, Trustee of the John D. Pierce Revocable Inter-vivos Trust, w/d/t June 24, 2010, as to an undivided 32.8571%, as tenants in common, as GRANTOR and

Sagebrush Equine Training Center for the Handicapped, Incorporated, an Idaho non-profit corporation, as GRANTEE(S)

whose current address is: c/o Cheryl Bennett, 100 Let'er Buck Road, Hailey, Idaho 83333.

WITNESSETH that said Grantor(s), for an in consideration in lawful money of the United States of America, in hand paid by the Grantee, the receipt whereof is hereby acknowledged, does by these premises remise, release and forever QUITCLAIM, unto the said Grantee(s) and to its heirs and assigns all right, title and interest in and to the water right identified in the records of the Idaho Department of Water Resources as Water Right No: 37-509 and Water Right No: 37-8098, and no others, for beneficial use upon the property conveyed to Grantee this same date by Warranty Deed recorded as Instrument No. _____, records of Blaine County, Idaho.

See "Exhibit A" attached hereto

TO HAVE AND TO HOLD, All and singular the said premises, together with the appurtenances, unto the Grantee and to its heirs and assigns forever.

IN WITNESS WHEREOF, the grantor(s) has executed this deed on the date set forth above.

The R. Daniel Olmstead Revocable Trust
Trust

R. Daniel Olmstead Trustee
By: R. Daniel Olmstead, Trustee

John D. Pierce Revocable Inter-vivos

John D. Pierce Trustee
By: Peter Hitch, Trustee

STATE OF _____)
) ss.
COUNTY OF _____)

On this _____ day of _____, _____, before me, the undersigned, a Notary Public, in and for said State, personally appeared

known to me, and or identified to me on the basis of satisfactory evidence, to be the Trustee's of R. Daniel Olmstead Jr the Trust that executed the within instrument and acknowledged to me that he/she/they executed the same on behalf of the Trust.

WITNESS MY HAND AND OFFICIAL SEAL.

Notary Public
Notary Resides: _____
My commission expires: _____

Exhibit A
LEGAL DESCRIPTION

Order No.: 21117429

Lots 1 & 2 of ARMSTRONG RANCH SUBDIVISION AMENDED, according to the official plat thereof, recorded as Instrument No. 263627, Records of Blaine County, Idaho.

EXCEPTING THEREFROM the following portion of Lot 1, more particularly described as follows:

Commencing at an iron pin marking the Northwest Corner of the SW¼NE¼, Section 12, Township 1 North, Range 18 East of the Boise Meridian; thence North 89°11'39" East 1311.57 feet along the North boundary of said SW¼NE¼ to an iron pin on the West boundary of State Highway No. 75; thence South 0°16'32" West 26.14 feet along said Highway boundary to a brass cap highway monument; thence South 0°12'17" East 571.86 feet along said Highway boundary to an iron pin marking the REAL POINT OF BEGINNING.

Thence continuing South 0°12'17" East 148.00 feet to a fence intersection;

Thence South 89°47'43" West 54.00 feet along a fence to a fence intersection;

Thence North 26°11'57" West 332.55 feet along a fence to a fence intersection;

Thence South 53°08'04" East 250.35 feet to the POINT OF BEGINNING.

CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

State of California

County of ORANGE

On DEC. 14, 2011 before me, TERESA DiCICCIO, Notary Public.
(Here insert name and title of the officer)

personally appeared R. DANIEL OLMSTEAD

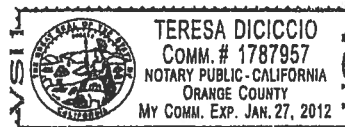
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Teresa DiCiccio
Signature of Notary Public

(Notary Seal)



ADDITIONAL OPTIONAL INFORMATION

DESCRIPTION OF THE ATTACHED DOCUMENT

Quitclaim Deed.

(Title or description of attached document)

(Title or description of attached document continued)

Number of Pages 1 Document Date Dec 14, 2011

(Additional information)

CAPACITY CLAIMED BY THE SIGNER

- ☐ Individual(s)
☐ Corporate Officer

(Title)

- ☐ Partner(s)
☐ Attorney-in-Fact
☐ Trustee(s)
☐ Other _____

INSTRUCTIONS FOR COMPLETING THIS FORM

Any acknowledgment completed in California must contain verbiage exactly as appears above in the notary section or a separate acknowledgment form must be properly completed and attached to that document. The only exception is if a document is to be recorded outside of California. In such instances, any alternative acknowledgment verbiage as may be printed on such a document so long as the verbiage does not require the notary to do something that is illegal for a notary in California (i.e. certifying the authorized capacity of the signer). Please check the document carefully for proper notarial wording and attach this form if required.

- State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment.
- Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed.
- The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public).
- Print the name(s) of document signer(s) who personally appear at the time of notarization.
- Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/they, is /are) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording.
- The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form.
- Signature of the notary public must match the signature on file with the office of the county clerk.
 - ✦ Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document.
 - ✦ Indicate title or type of attached document, number of pages and date.
 - ✦ Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).
- Securely attach this document to the signed document

CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

State of California

County of ORANGE

On Dec. 14, 2011 before me, TERESA DiCiccio, Notary Public.
(Here insert name and title of the officer)

personally appeared PETER HITCH

who 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.

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Teresa DiCiccio
Signature of Notary Public

(Notary Seal)



ADDITIONAL OPTIONAL INFORMATION

DESCRIPTION OF THE ATTACHED DOCUMENT

(Title or description of attached document)

(Title or description of attached document continued)

Number of Pages _____ Document Date _____

(Additional information)

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- Securely attach this document to the signed document

WARRANTY DEED

FOR VALUE RECEIVED

R. Daniel Olmstead Jr., as Trustee of The R. Daniel Olmstead Revocable Trust, as to an undivided 67.1429% and Peter Hitch, Trustee of the John D. Pierce Revocable Inter-vivos Trust, u/d/t June 24, 2010, as to an undivided 32.8571%, as tenants in common

the Grantor, hereby grants, bargains, sells, conveys and warrants unto

Sagebrush Equine Training Center for the Handicapped, Incorporated, an Idaho non-profit corporation

the grantee, whose current address is c/o Cheryl Bennett, 100 Let'er Buck Road, Hailey, ID 83333

the following described premises, to wit:

See "Exhibit A" attached hereto

SUBJECT TO: Current General Taxes, a lien in the process of assessment, not yet due or payable. Easements, restrictions, reservations, provisions of record, and assessments, if any.

TO HAVE AND TO HOLD the said premises, with their appurtenances unto the said Grantee, their heirs and assigns forever. And the said Grantor does hereby covenant to and with the said Grantee, that the Grantor is the owner in fee simple of said premises, that said premises are free from all encumbrances and that the Grantor will warrant and defend the same from all lawful claims whatsoever.

Dated: December 14, 2011

The R. Daniel Olmstead Revocable Trust

John D. Pierce Revocable Inter-vivos Trust

R. Daniel Olmstead, Trustee
By: R. Daniel Olmstead, Trustee

Peter Hitch, Trustee
Peter Hitch, Trustee

STATE OF California)
) ss.
COUNTY OF)

On this _____ day of _____, _____, before me, the undersigned, a Notary Public, in and for said State, personally appeared

known to me, and/or identified to me on the basis of satisfactory evidence, to be the Trustee's of R. Daniel Olmstead Jr the Trust that executed the within instrument and acknowledged to me that he/she/they executed the same on behalf of said Trust.

WITNESS MY HAND AND OFFICIAL SEAL.

Notary Public
Resides at:
My commission expires: _____

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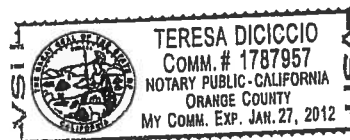
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Signature of Notary Public

(Notary Seal)



ADDITIONAL OPTIONAL INFORMATION

DESCRIPTION OF THE ATTACHED DOCUMENT

WARRANTY DEED

(Title or description of attached document)

(Title or description of attached document continued)

Number of Pages 1 Document Date 12-14-11

(Additional information)

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☐ Corporate Officer

(Title)

- ☐ Partner(s)
☐ Attorney-in-Fact
☐ Trustee(s)
☐ Other _____

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personally appeared PETER HITCH

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DESCRIPTION OF THE ATTACHED DOCUMENT

WARRANTY DEED
(Title or description of attached document)

(Title or description of attached document continued)

Number of Pages 1 Document Date 12-14-11

(Additional information)

CAPACITY CLAIMED BY THE SIGNER

- ☐ Individual (s)
☐ Corporate Officer

(Title)

- ☐ Partner(s)
☐ Attorney-in-Fact
☐ Trustee(s)
☐ Other _____

- State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment.
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- Securely attach this document to the signed document

FILED EFFECTIVE

STATEMENT OF CHANGE OF REGISTERED AGENT
REGISTERED OFFICE, OR BOTH
(See reverse for instructions)

2011 AUG 31 AM 9:58

CLERK OF STATE
STATE OF IDAHO

File #:

C99535

The undersigned entity submits the following statement for the purpose of changing its registered agent, its registered office, or both, in the State of Idaho.

1. The name of the entity is:

Sagebrush Equine Training Center for theHandcrafted Incorporated2. The name and street address of its old registered agent and office is:10 Lindsey Jameson100 Let'er Buck Rd.Hailey, ID 833333. The name and street address of its new registered agent and office in Idaho is:Cheryl Bennett100 Let'er Buck Rd.

(not a PO Box or PMB)

Hailey, ID 83333

I consent to serve as registered agent for the above-named entity.

Cheryl R Bennett

(Signature of new registered agent)

6/17/11

(Date)

Dated:

6/31/2011

Signature:

Esther D. Hsman

Printed:

ESTHER D. HSMAN

Capacity:

PRESIDENT

FILE ONE COPY

NO FEE REQUIRED

change_ra_ro.pmd Rev. 07/2010



Board of Directors

Ann Leonardo
President

Leslie Benz
*Vice President for
Development*

Lynn Kaplan
*Vice President for
Governance*

Elizabeth Bunce
Secretary

Scott Porter
Treasurer

Esther Ochsman
Past-President

Mary Ahern
Liz Brown
Miren DuPont
Sanchez
Pam Goetz
John McDonald
Ray Mello
Kristin Orr
Susan Passovoy
Ken Pierce
David Stoecklein
Jeffra Syms
Penny Weiss
Margi Woodward

Cheryl Bennett
Executive Director

January 10, 2012

IDWR Southern Region
1341 Fillmore St. Suite 200
Twin Falls, ID 83301

To whom it may concern:

Included herewith is a Notice of Change in Water Right Ownership and copies of the Warranty Deed transferring the property to which the subject water rights are appurtenant and a Quitclaim Deed transferring water right numbers 37-509 and 37-8098.

Please note that the 114 Calypso Lane address shown in section 3 of the change in ownership form is the actual address of this property and our new mailing address. Do not use the 100 Let'er Buck Road address shown on the Deeds as we will be abandoning that address when we move to the Calypso Lane property.

If you have any questions, you can contact me at 788-5626.

Sincerely,

Scott Porter
Treasurer

RECEIVED
JAN 11 2012
DEPT. OF WATER RESOURCES
SOUTHERN REGION

RECEIVED

JAN 13 2012

DEPT. OF WATER RESOURCES
SOUTHERN REGION

1-12-12

CAROLE-

HERE IS \$25.00 CHECK FOR
CHANGE IN OWNERSHIP OF RIGHT
37-509 FOR SAGEBRUSH EQUINE
TRAINING CENTER FOR THE HANDICAPPED.

PLEASE REMEMBER TO USE OUR NEW
MAILING ADDRESS OF 114 CALYPSO LANE,
BELLEVUE, ON THE NEW RECORD FOR
BOTH OF OUR WATER RIGHTS (509 & 8098)

SCOTT PORTER



State of Idaho

DEPARTMENT OF WATER RESOURCES

Southern Region, 1341 Fillmore Street, Suite 200 • Twin Falls, Idaho 83301-3380
Phone: (208) 736-3033 • Fax: (208) 736-3037 • Web Site: www.idwr.idaho.gov

C. L. "BUTCH" OTTER
Governor

GARY SPACKMAN
Interim Director

January 13, 2012

SAGEBRUSH EQUINE TRAINING CENTER FOR THE HANDICAPPED
114 CALYPSO LN
BELLEVUE ID 83313

RE: Change of Ownership for Water Right Nos. 37-509, 37-8098

Dear Water Right Holders:

The department acknowledges receipt of correspondence changing ownership of the above referenced water rights to you. The department has modified its records to reflect the change in ownership and has enclosed computer-generated reports 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 Sections 42-222 and 42-223, Idaho Code.

Please 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. Change reporting forms are available from any office of the department.

Please feel free to contact this office if you have any questions regarding this matter.

Sincerely,

Carrie Hahn
Clerk

Enclosures