

Received Nov. 5. 2010

STATE OF IDAHO
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.

Water Right/Claim No.	Split?	Water Right/Claim No.	Split?	Water Right/Claim No.	Split?
35-10423 PD	Yes ☐ OK		Yes ☐		Yes ☐
35-7453B Ag	Yes ☐ OK	will be completed in Eastern	Yes ☐		Yes ☐
35-13254 PD	Yes ☐ OK		Yes ☐		Yes ☐
35-7592, Ad	Yes ☐ OK	will be completed in Eastern	Yes ☐		Yes ☐
35-7453A Ad	Yes ☐ OK	will be completed in Eastern	Yes ☐		Yes ☐

2. Previous Owner's Name: George R. Jackson

Name of current water right holder/claimant

3. New Owner(s)/Claimant(s): George R. and D. Glenell Jackson living trust dated May 8, 1996

Name of each new owner as listed on the conveyance document

New owner continued

Name connector ☐ and ☐ or ☐ and/or

468 Neff Circle

Mailing address

Blackfoot

ID

83221

City

State

ZIP

(208) 782-2253

dshipley@ida.net

SUPPORT DATA

Telephone

Email

4. If the water rights and/or adjudication claims were split, how did the division occur? **IN FILE # 35-10423**
- ☐ 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: May 8, 1996-date trust established

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: D. Glenell Jackson Trustee 10-27-10
Signature of new owner/claimant Title, if applicable Date

Signature: _____
Signature of new owner/claimant Title, if applicable Date

For IDWR Office Use Only:

Received by: JB Date: 11/5/2010 Receipt No. E036257 Receipt Amt. \$50.00

Approved by: _____ Processed by: _____ Date: _____

WARRANTY DEED

446463

For Value Received, **GEORGE R. JACKSON AND D. GLENELL JACKSON,**

Hereinafter called grantor, hereby grants, bargains, sells and conveys unto: **GEORGE R. JACKSON and D. GLENELL JACKSON, Trustees, or their successors in trust, under the GEORGE R. AND D. GLENELL JACKSON LIVING TRUST dated May 8, 1996, and any amendments thereto.**

Hereinafter called the grantee, whose current address is: 1762 W. 800 S.
Pingree, ID 83262

the following described premises, in Bingham County, Idaho, to-wit:

TOWNSHIP 4S, RANGE 33 E.B.M., BINGHAM COUNTY. SECTION 7: LOT 4 AND THE WEST 155 OF THE SE 1/4 SW 1/4.

EXCEPTING RIGHT OF WAY HIGHWAY 39

ALSO EXCEPTING:

BEGINNING AT A POINT 228 FEET SOUTH, OF THE NW CORNER OF LOT 4, AND RUNNING THENCE SOUTH 209'; THENCE EAST 222 FEET; THENCE NORTH 209'; THENCE WEST 222 TO THE POINT OF BEGINNING.

TO HAVE AND TO HOLD the said premises, with their appurtenances unto the said Grantees and to the Grantee's 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 they are free from all encumbrances except as described above and that Grantor will warrant and defend the same from all lawful claims whatsoever.

DATED: MAY 08 1996

George R. Jackson
GEORGE R. JACKSON

D. Glenell Jackson
D. GLENELL JACKSON

STATE OF IDAHO, COUNTY OF BANNOCK

On this MAY 08 1996 before
me, a notary public in and for said State, personally
appeared

GEORGE R. JACKSON
D. GLENELL JACKSON

STATE OF IDAHO, COUNTY OF

I hereby certify that this instrument was filed for
at the request of

at _____ minutes past _____ o'clock _____ m.
this _____ day of _____

19 _____, in my office, and duly recorded in Book of
Deeds at page _____

known to me to be the person(s) whose name(s)
is/are subscribed to the within instrument, and
acknowledged to me that they executed the
same.

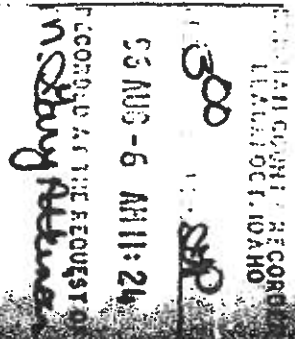
Ex-Officio Recorder

Wendy Anderson
Notary Public
Residing at _____, Bannock County, Idaho
Comm. Expires 8-17-2002

By _____
Deputy.

Fees \$ _____
Mail to: _____

446463



WARRANTY DEED

450159

For Value Received, GEORGE R. JACKSON AND D.GLENELL JACKSON,

Hereinafter called grantor, hereby grants, bargains, sells and conveys unto: GEORGE R. JACKSON and D.GLENELL JACKSON, Trustees, or their successors in trust, under the GEORGE R. AND D. GLENELL JACKSON LIVING TRUST dated May 8, 1996, and any amendments thereto.

Hereinafter called the grantee, whose current address is: 1762 W. 800 S.
Pingree, ID 83262

the following described premises, in Bingham County, Idaho, to-wit:

Beginning at the South quarter corner of Sec. 7, Twp. 4 South, Range 33 E.B.M. and running thence West 180.7 feet; thence North 193 feet; thence North 5027' East 560 feet; thence North 25052' East 323 feet; to the North and South center line of Sec. 7; thence South 1031 feet to the place of beginning.

RECORDED AT THE REQUEST OF
M. GARY FIDELMAN
96 DEC 18 PM 12:22
BINGHAM COUNTY RECORDER
CLACKFOOT, IDAHO

TO HAVE AND TO HOLD the said premises, with their appurtenances unto the said Grantees and to the Grantee's 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 they are free from all encumbrances except as described above and that Grantor will warrant and defend the same from all lawful claims whatsoever.

DATED: 0101 8 1996

George R. Jackson
GEORGE R. JACKSON

D. Glenell Jackson
D.GLENELL JACKSON

STATE OF IDAHO, COUNTY OF BANNOCK

On this 1996 before me, a notary public in and for said State, personally appeared

GEORGE R. JACKSON
D.GLENELL JACKSON

known to me to be the person(s) whose name(s) is/are subscribed to the within instrument, and acknowledged to me that they executed the same.

Heather K. Mayo
Notary Public
Residing at Jerome, Idaho
Comm. Expires 9/29/2001

STATE OF IDAHO, COUNTY OF

I hereby certify that this instrument was filed for at the request of
at minutes past o'clock m.
this day of
19, in my office, and duly recorded in Book of Deeds at page

Ex-Officio Recorder

By Deputy.

Fees \$

Mail to:

450159



WARRANTY DEED

455527

For Value Received, GEORGE R. JACKSON AND D. GLENELL JACKSON,

Hereinafter called grantor, hereby grants, bargains, sells and conveys unto: GEORGE R. JACKSON and D. GLENELL JACKSON, Trustees, or their successors in trust, under the GEORGE R. AND D. GLENELL JACKSON LIVING TRUST dated May 8, 1996, and any amendments thereto.

Hereinafter called the grantee, whose current address is: 1762 West 800 S.
Pingree, Idaho 83262

the following described premises, in Bingham County, Idaho, to-wit:

TOWNSHIP 4S, RANGE 33 E.B.M., BINGHAM COUNTY, SECTION 7: SE ¼ SE ¼, SWSE
EXCEPTING THEREFROM THE RIGHT OF WAY FOR STATE HIGHWAY 39.

TO HAVE AND TO HOLD the said premises, with their appurtenances unto the said Grantees and to the Grantee's 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 they are free from all encumbrances except as described above and that Grantor will warrant and defend the same from all lawful claims whatsoever.

DATED:

455527

George R. Jackson
GEORGE R. JACKSON

D. Glenell Jackson
D. GLENELL JACKSON

STATE OF IDAHO, COUNTY OF Bingham
On this 5 June 97 before Beverly Thompson
me, a notary public in and for said State, personally
appeared

GEORGE R. JACKSON
D. GLENELL JACKSON

known to me to be the person(s) whose name(s)
is/are subscribed to the within instrument, and
acknowledged to me that they executed the
same.

Beverly Thompson
Notary Public

Residing at _____, Idaho
Comm. Expires 4-1-01

KEY BANK OF IDAHO
P. O. Box 760, Blackfoot, ID 83221

STATE OF IDAHO, COUNTY OF _____
I hereby certify that this instrument was filed for
at the request of _____
at _____ minutes past _____ o'clock _____ m.
this _____ day of _____
19 _____, in my office, and duly recorded in Book of
Deeds at page _____

Ex-Officio Recorder

By _____
Deputy.

Fees \$ _____
Mail to: _____

RECORDED AT THE REQUEST OF

97 JUL 14 AM 10:01

FEE \$3.00 DEP 0.00

H. Craig Atkinson
P.O. Box 1509, Twin Falls, ID
BINGHAM COUNTY RECORDER 83303-1509
BLACKFOOT, IDAHO

WARRANTY DEED

450160

For Value Received, GEORGE R. JACKSON AND D.GLENELL JACKSON,

Hereinafter called grantor, hereby grants, bargains, sells and conveys unto: GEORGE R. JACKSON and D.GLENELL JACKSON, Trustees, or their successors in trust, under the GEORGE R. AND D. GLENELL JACKSON LIVING TRUST dated May 8, 1996, and any amendments thereto.

Hereinafter called the grantee, whose current address is: 1762 W. 800 S.
Pingree, ID 83262

the following described premises, in Bingham County, Idaho, to-wit:

Beginning at a point on the South line of Section 7, Township 4, South, Range 33 E. 3. 160.7 feet West of South quarter corner of said Section 7, and running thence North 193 feet to center line of latter; thence following said center line North 5°27' East 560 feet; thence North 25°54' East 322 feet; to the North and South center line of said Section 7; thence North 259 feet to the NE corner of the SE 1/4 of Section 7; thence West 1132 feet; thence South 80 rods, more or less to the South line of said Section 7; thence East 949.3 feet to the point of beginning, containing 31.05 acres.

RECORDED AT THE REQUEST OF
M. Cary Alderson
55 DEC 19 PM 12:22
300
OFF

TO HAVE AND TO HOLD the said premises, with their appurtenances unto the said Grantees and to the Grantee's 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 they are free from all encumbrances except as described above and that Grantor will warrant and defend the same from all lawful claims whatsoever.

DATED: DECEMBER 10, 1996

George R. Jackson
GEORGE R. JACKSON

D. Glenell Jackson
D. GLENELL JACKSON

STATE OF IDAHO, COUNTY OF BANNOCK

On this 16th day of December 1996 before me, a notary public in and for said State, personally appeared

GEORGE R. JACKSON
D. GLENELL JACKSON

known to me to be the person(s) whose name(s) is/are subscribed to the within instrument, and acknowledged to me that they executed the same.

Heather K. Mayo
Notary Public
Residing at Jerome, Idaho
Comm. Expires 9/29/2001

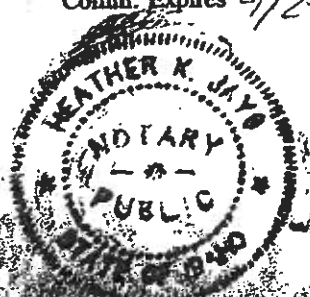
STATE OF IDAHO, COUNTY OF

I hereby certify that this instrument was filed for at the request of _____ at _____ minutes past _____ o'clock _____ m. this _____ day of _____, 19____, in my office, and duly recorded in Book of Deeds at page _____

Ex-Officio Recorder

By _____ Deputy.
Fees \$ _____
Mail to: _____

450160



CERTIFICATION OF VITAL RECORD

STATE OF 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 PRIMARY EVIDENCE OF THE DEATH UNDER §§24-119 AND §27-27A, CHD CODE

Local Reg. No. 41-c

DECEDENT	1. DECEDENT'S LEGAL NAME (Include AKA's if any) (First, Middle, Last, Suffix) GEORGE RAYMOND JACKSON		2. SEX MALE	3. SOCIAL SECURITY NUMBER 519-01-4701
	4a. AGE-Last Birthday 94 (Years)		5. DATE OF BIRTH (Mo/Day/Yr) 12/01/1915	
TYPE OR PRINT IN PERMANENT BLACK INK DO NOT USE FELT TIP PEN	7a. RESIDENCE - STATE OR FOREIGN COUNTRY IDAHO		7b. COUNTY BINGHAM	
	7c. CITY OR TOWN SPRINGFIELD		7d. ZIP CODE 83262	
FOR INSTRUCTIONS SEE HANDBOOKS	7e. STREET AND NUMBER 1762 W 800 S		7f. 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) DELTA GLENELL TANNER	
PARENTS	10. EVER IN U.S. ARMED FORCES? ☐ Yes ☒ No		11a. BIRTHPLACE (State, Territory, or Foreign Country) WYOMING	
	11b. BIRTHPLACE (State, Territory, or Foreign Country) UTAH		12b. BIRTHPLACE (State, Territory, or Foreign Country) UTAH	
INFORMANT	13a. INFORMANT'S NAME (Type or print) DELTA GLENELL TANNER		13b. RELATIONSHIP TO DECEDENT WIFE	
	13c. MAILING ADDRESS (Street and Number, City, State, Zip Code) 1762 W 800 S SPRINGFIELD, ID 83262		14. NAME AND COMPLETE ADDRESS OF FUNERAL FACILITY HAWKER FUNERAL HOME 132 SOUTH SHILLING AVENUE BLACKFOOT, IDAHO 83221	
DISPOSITION	15. PLACE OF DISPOSITION (Name and address of cemetery, crematory, other place) SPRINGFIELD-STERLING CEMETERY SPRINGFIELD, IDAHO 83277		16. NAME AND COMPLETE ADDRESS OF FUNERAL FACILITY HAWKER FUNERAL HOME 132 SOUTH SHILLING AVENUE BLACKFOOT, IDAHO 83221	
	17a. SIGNATURE OF FUNERAL SERVICE LICENSEE OR PERSON ACTING AS SUCH ELECTRONICALLY FILED: PERRY L. HAWKER		17b. LICENSE NUMBER (Of licensee) M0734	
PLACE OF DEATH	18. WAS CORONER CONTACTED DUE TO CAUSE OF DEATH? ☐ Yes ☒ No		19. IF DEATH OCCURRED IN A HOSPITAL: ☐ Inpatient ☐ ER/Outpatient ☐ Outpatient ☐ Hospice facility ☐ Nursing home/Long term care facility ☐ Decedent's home ☐ Other (Specify) _____	
	20. FACILITY NAME (If not facility, give street and number) BINGHAM MEMORIAL REHAB & EXTENDED CARE FACILITY		21. CITY, TOWN, OR LOCATION OF DEATH, AND ZIP CODE BLACKFOOT, ID 83221	
DATE OF DEATH	22. DATE OF DEATH (Mo/Day/Yr) (Spell month) February 22, 2010		23. TIME OF DEATH 23:00 (24hr)	
	24. DATE PRONOUNCED DEAD (Mo/Day/Yr) (Spell month) February 22, 2010		25. TIME PRONOUNCED DEAD 23:00 (24hr)	
CAUSE OF DEATH	26. 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: IMMEDIATE CAUSE (Final disease or condition resulting in death) a. DEHYDRATION DUE TO (or as a consequence of): b. DEMENCIA DUE TO (or as a consequence of): c. _____ DUE TO (or as a consequence of): d. _____		Approximate Interval: Onset to Death 2 WEEKS 6 MONTHS	
	PART II. Enter other significant conditions contributing to death but not resulting in the underlying cause given in Part I: 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		28a. WAS AN AUTOPSY PERFORMED? ☐ Yes ☒ No 28b. WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE THE CAUSE OF DEATH? ☐ Yes ☒ No 31. MANNER OF DEATH ☒ Natural ☐ Homicide ☐ Accident ☐ Pending investigation ☐ Suicide ☐ Could not be determined	
ITEMS 32-38 TO BE USED FOR EXTERNAL CAUSES ONLY (CORONER)	32. DATE OF INJURY (Mo/Day/Yr) (Spell month) February 22, 2010		33. TIME OF INJURY 23:00 (24hr)	
	34. PLACE OF INJURY (Decedent's home, farm, street, construction site, nursing home, restaurant, forest, etc.) SPRINGFIELD-STERLING CEMETERY		35. INJURY AT WORK? ☐ Yes ☒ No	
CERTIFIER	36. LOCATION OF INJURY: State _____ City/Town or County _____ Zip Code _____ Street and Number or Location _____ Apartment Number _____		37. DESCRIBE HOW INJURY OCCURRED. IF TRANSPORTATION INJURY, STATE THE TYPE(S) OF VEHICLE(S) INVOLVED (Automobile, pickup, motorcycle, ATV, bicycle, etc.) SPECIFY WHICH VEHICLE DECEDENT OCCUPIED, if applicable TRANSPORTATION INJURY ONLY 38a. WAS DECEDENT: ☐ Driver/Operator ☐ Passenger ☐ 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. 39b. LICENSE NUMBER O-00222		39c. DATE SIGNED 3 / 1 / 2010 MM DD YYYY	
REGISTRAR	39d. NAME, ADDRESS, AND ZIP CODE OF CERTIFIER (Type or print) THOMAS S. CALL, D.O. THOMAS S. CALL, 98 POPLAR STREET BLACKFOOT, ID 83221		40. REGISTRAR'S SIGNATURE <i>Jane S. Smith</i>	
	41. DATE SIGNED 3 / 1 / 2010 MM DD YYYY		42. DATE SIGNED 3 / 1 / 2010 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: March 2, 2010

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

JANE S. SMITH
STATE REGISTRAR

T-13875

LOT 3 PAUL T & ORA LEE WOODS
30.55 WD 12-8-75 206786

LOT 4
30.60
GEORGE R & GLENELL JACKSON LIV TRST
WD 1-29-93 413148
8-6-96 446463

T-1661

84/223

T-2158
4501.60
4501.54
322
560
193
180.7

84/224

84/225

84/223

T-133/4

T-13372

ORSON H/CELESTE H EGGLESTON
WD 10-7-05 559190

208.75
11476
208.75

VERDEAN/KATHY LIN EGGLESTON
WD 10-12-08 559322
Orson H & Celeste H Eggleston

ORSON H/CELESTE H EGGLESTON
WD 10-7-05 559190
ELWIN SCOTT & NADINE
TILLET HADERLIE
WD 10-17-96 448516

5058
GEORGE & GENNEL JACKSON
70/199; 91/131-2; 165915
45527
5258

NORTH