

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
NOTICE OF CHANGE IN WATER RIGHT OWNERSHIP

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SEP 21 2006

Department of Water Resources
 Eastern Region

Please print or type. Attach pages with additional information. Instructions are included at the end of this form.
 Incomplete forms will be returned.

1. Please list the water right number(s) and/or adjudication claim number(s) (if any) for each water right to be changed. List just the adjudication claim number if there is no corresponding water right record on file with the department. Indicate, by checking in the space provided (under the "split" heading), if the change in ownership is limited to a portion of a water right in which case division of the existing water right or adjudication claim record will be required.

Water Right No(s).	Adjudication Claim No(s).	Split	Water Right No(s).	Adjudication Claim No(s).	Split
23-4061 VI					

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DEPARTMENT OF
 WATER RESOURCES

2. The following **REQUIRED** information must be submitted with this form:

- A. The appropriate **FILING FEE**. See instructions for fee amounts. \$25
- B. A copy of the most recent **DEED, TITLE POLICY, CONTRACT OF SALE** or other legal document indicating your ownership of the property and water right(s) or claim(s) in question, **WITH ATTACHED LEGAL DESCRIPTION**.
- C. Either of the following (if necessary to clarify division of water rights or other complex property descriptions):
PLAT OF PROPERTY or **SURVEY MAP** clearly showing the location of the point(s) of diversion and place of use of your water right(s) and/or adjudication claim(s) (these are usually attached to your deed or on file with the county).

OR

If your water right(s) and/or adjudication claim(s) is for ten or more acres of irrigation, you must submit a USDA Farm Service Agency **AERIAL PHOTO** with the irrigated acres outlined and point(s) of diversion clearly marked. The **AERIAL PHOTO** should be submitted in place of the **PLAT OF PROPERTY** or **SURVEY MAP**.

3. Name and Address of Former Owner/Claimant(s)

Joe Sklenar

Loretta Sklenar

- ✓ 4. New Owner/Claimant(s)

Jay & Myrna Grayson

Name Connector (Check one) ☐ and, ☐ or, ☐ and/or

New Mailing Address

5647 So 45 E

City, State and ZIP Code

Idaho Falls Idaho 83406

New Telephone Number

() 208-522-7894

- ✓ 5. Date you acquired the property

6 Sept 2006

6. **If the change in ownership affects the entire water right for each water right or adjudication claim number listed in item 1, THEN SKIP THIS ITEM AND GO TO ITEM 7.** If the change in ownership divides the water right(s) among multiple owners, you must describe, in detail, your portion of each water right after the change. Fill in the appropriate spaces in the box(es) below to describe your water right(s) after the change (one water right per box, you may copy this page as necessary). If your quantity of water is greater than a proportionate split, you must attach documentation to show justification for a larger amount. If you are not sure how to identify your portion of the original water right or adjudication claim records, please contact the nearest IDWR office for assistance.

DESCRIPTION OF YOUR PORTION OF WATER RIGHT (If the right(s) will not be split, skip this area and proceed to item 7)		
Water Right and/or Adjudication Claim Number _____		
Water Use	Diversion Rate or Volume (cubic feet per second or acre-feet per annum)	Description (acres, number and type of stock, homes, etc)
Irrigation	_____	_____
Stock	_____	_____
Domestic	_____	_____
Other _____	_____	_____
Total	_____	_____

DESCRIPTION OF YOUR PORTION OF WATER RIGHT (If the right(s) will not be split, skip this area and proceed to item 7)		
Water Right and/or Adjudication Claim Number _____		
Water Use	Diversion Rate or Volume (cubic feet per second or acre-feet per annum)	Description (acres, number and type of stock, homes, etc)
Irrigation	_____	_____
Stock	_____	_____
Domestic	_____	_____
Other _____	_____	_____
Total	_____	_____

X 7. Signature of New Owner(s) or Claimant(s) _____
(include title if applicable) _____

For Snake River Basin Adjudication Claims: Please attach a Notice of Appearance completed by your attorney, if you wish IDWR to correspond with him/her for all matters related to your claims.

For Office Use Only

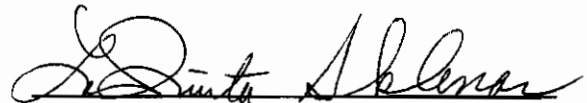
Received by _____ Date _____ Fee \$25-
 Receipted by gc Date 9-21-06 Receipt No. E032252
 Processed by _____ AJ Date _____ WR _____ Date _____

AFFIDAVIT OF SURVIVORSHIP

That, I, **LaQuita Sklenar**, as heir at law of the Estate of **Joseph Sklenar aka Joe Sklenar**, who became deceased on October 18, 2005, in Idaho Falls, Bonneville County, State of Idaho and was a resident of Afton, Lincoln County, Wyoming, at the time of his death, that said decedent died intestate and that I am the surviving spouse of the decedent and the only party entitled to the estate of the decedent, in accordance with the laws of the State of Wyoming.

That more than 30 days have elapsed since the death of the decedent and that no application for the appointment of a personal representative of said decedent is pending or has been granted in any jurisdiction.

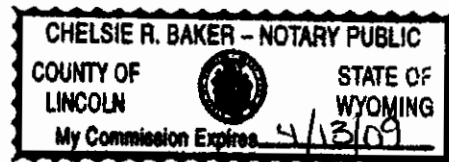
That I, **LaQuita Sklenar**, Spouse of the decedent is the only party entitled to the estate of the decedent, **Joseph Sklenar aka Joe Sklenar**, and there are no other distributees of the decedent having a right to succeed to any of the property of the decedent under probate proceedings; and therefore entitled to delivery of all of decedent's property.


LaQuita Sklenar

Subscribed and sworn to before me by **LaQuita Sklenar**, this 19 day of September, 2006.

Witness my hand and official seal.


NOTARY PUBLIC



STATE OF IDAHO
CERTIFICATION OF VITAL RECORD

STATE OF IDAHO
IDAHO DEPARTMENT OF HEALTH AND WELFARE
BUREAU OF HEALTH POLICY AND VITAL STATISTICS

CERTIFICATE OF DEATH

Date Filed OCTOBER 27, 2005

State File No. 2005-08282

DECEDENT - LEGAL NAME JOSEPH SKLENAR			
SEX MALE	SOCIAL SECURITY NUMBER [REDACTED]	AGE 70 YEARS	DATE OF BIRTH APRIL 15, 1935
BIRTHPLACE ABIE, NEBRASKA		PLACE OF RESIDENCE AFTON, WYOMING	
MARITAL STATUS AT TIME OF DEATH MARRIED		NAME OF SURVIVING SPOUSE (If wife, maiden name) LAQUITA STEPANEK	WAS DECEDENT EVER IN U.S. ARMED FORCES? YES
FATHER - NAME LOUIS J. SKLENAR			BIRTHPLACE CZECH REPUBLIC
MOTHER - MAIDEN NAME JOSEPHINE SOBOTKA			BIRTHPLACE NEBRASKA
METHOD OF DISPOSITION BURIAL		FUNERAL SERVICE LICENSEE F. DUAYNE SIMS	
NAME AND ADDRESS OF FUNERAL FACILITY SIMS FUNERAL HOME, SODA SPRINGS, IDAHO			
DATE OF DEATH OCT. 18, 2005	TIME OF DEATH 9:12 P.M.	CITY, TOWN OR LOCATION OF DEATH IDAHO FALLS, IDAHO	COUNTY OF DEATH BONNEVILLE
CAUSE OF DEATH (underlying cause last) a. SEPTIC SHOCK			Approximate Interval Between Onset and Death 48 HOURS
DUE TO (or as a consequence of): b. NECROTIC SMALL BOWEL			48 HOURS
DUE TO (or as a consequence of): c. ACUTE VOLVULUS WITH GANGRENE			14 DAYS
DUE TO (or as a consequence of): d. MESENTERIC VASCULAR DISEASE			YEARS
OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH but not resulting in the underlying cause given above NONE STATED			WAS AN AUTOPSY PERFORMED? YES
MANNER OF DEATH NATURAL	NAME OF CERTIFIER KENNETH E. KRELL, M.D.		TITLE PHYSICIAN
CORONER SUBSEQUENT CERTIFICATION IF NECESSARY			
EXTERNAL CAUSES ONLY			
DATE OF INJURY	TIME OF INJURY	PLACE OF INJURY	INJURY AT WORK?
LOCATION WHERE INJURY OCCURRED			
DESCRIPTION OF HOW INJURY OCCURRED			

AMENDED 11/10/2005

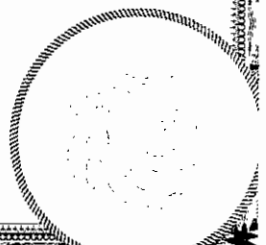
SUPPLEMENTAL INFORMATION ADDED 11/04/2005

This is a true and correct reproduction of the document officially registered and placed on file with the IDAHO BUREAU OF HEALTH POLICY AND VITAL STATISTICS.

DATE ISSUED: DECEMBER 16, 2005

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

Jane S. Smith
JANE S. SMITH
STATE REGISTRAR



BILL OF SALE TO WATER RIGHTS

That I, **LaQuita Sklenar**, as heir at law of the Estate of **Joseph Sklenar aka Joe Sklenar**, do hereby sell and transfer my ownership to the following **Water Right No. 23-4061 VI** for the sum of **Ten and no/100 Dollars (\$10.00)** to me paid in hand by **Jay Grayson and Myrna Grayson**, releasing all and any interest I might have had in the following described water rights in the State of Idaho.

Water Rights No. **23-4061 VI**

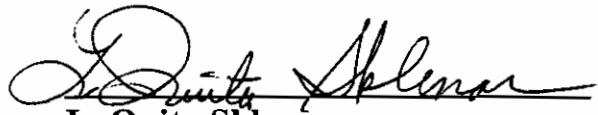
Source: **Barnes Creek**

Tributary: **McCoy Creek**

Beneficial Use: **Mining** From: **05/01 to 11/15** Diversion Rate: **1,000 CFS**
Total Diversion: **1,000 CFS**

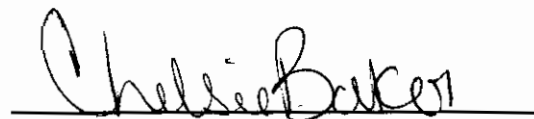
Location of Point of Diversion:

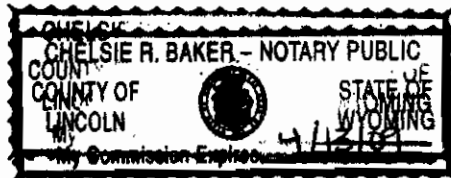
Barnes Creek **NW1/4SW1/4** **Sec 33,Twp 03S, Rge44E,B.M.**
Bonneville County
State of Idaho


LaQuita Sklenar

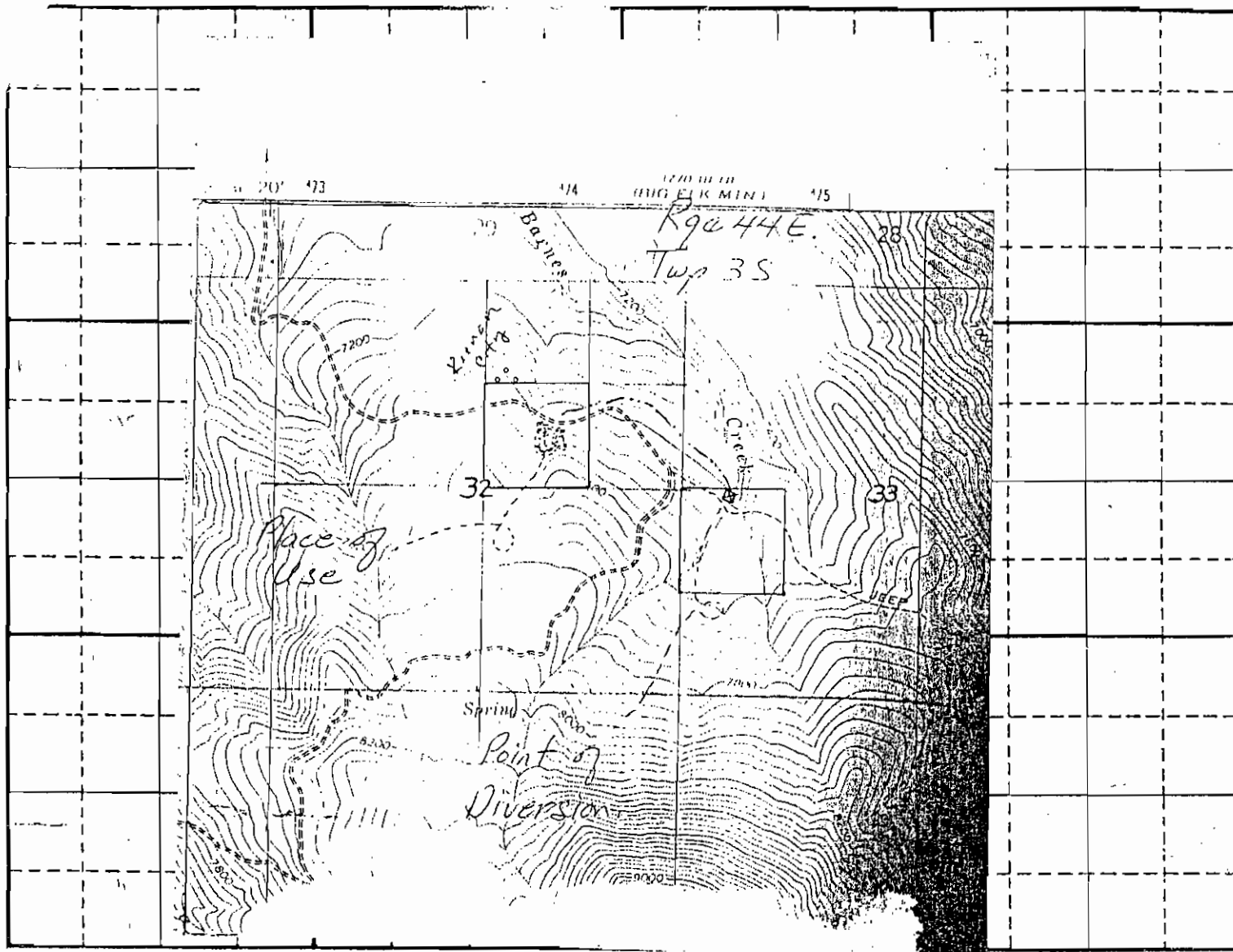
Subscribed and sworn to before me by **LaQuita Sklenar**, this 19 day of
September, 2006.

Witness my hand and official seal.


NOTARY PUBLIC



Remarks



Scale: 2 inches equal 1 mile.

Map should show the location of the point of diversion and the place of use of the water by 40-acre subdivisions, section, township and range of the public land survey system.

State of Idaho -

County of Caribou

) ss.

Be it known that the undersigned, being duly sworn, deposes and says that he, she, they subscribed the foregoing claim to a water right, together with all attached information, and that the matters and facts therein are true to the best of the affiant's knowledge.

Sworn to before me this

15th

day of

June

19

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(Claimant)