

MAR 13 2024

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCESDEPT. OF WATER RESOURCE
EASTERN 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. If the water right is leased to the Water Supply Bank, check "Yes". If you are not sure if the water right is leased to the Water Supply Bank, see #7 of the instructions.

Water Right/Claim No.	Split?	Leased to Water Supply Bank?	Water Right/Claim No.	Split?	Leased to Water Supply Bank?
21-7376	Yes ☐	Yes ☐		Yes ☐	Yes ☐
	Yes ☐	Yes ☐		Yes ☐	Yes ☐
	Yes ☐	Yes ☐		Yes ☐	Yes ☐
	Yes ☐	Yes ☐		Yes ☐	Yes ☐
	Yes ☐	Yes ☐		Yes ☐	Yes ☐

2. Previous Owner's Name: Boyd Yancey
Name of current water right holder/claimant
3. New Owner(s)/Claimant(s): Hali Mackert, Trent Yancey, Colin Yancey
New owner(s) as listed on the conveyance document Name connector ☐ and ☐ or
- 702 N. 2300 E. St. Anthony ID 83445
Mailing address City State Zip
- 208-709-4848 hali.mackert@gmail.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: July 13, 2023
6. Do you own the land identified as the water right place of use? Yes ☐ No ☐
☐ If no, attach evidence that written notice of the change of water right ownership has been delivered to the landowner of record.
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.
☐ If water right(s) are leased to the Water Supply Bank AND there are multiple owners, a Lessor Designation form is required.
☐ If water right(s) are leased to the Water Supply Bank, the individual owner or designated lessor must complete, sign and submit an IRS Form W-9.

8. Signature: Hali Mackert Title, if applicable: _____ Date: 3-11-24
 Signature of new owner/claimant
 Hali Mackert

Print name

Signature: Trent Yancey Title, if applicable: _____ Date: 3-11-24
 Signature of new owner/claimant
 Trent Yancey

Print name

Received by: JB Date: 3/13/2024 For IDWR Office Use Only: Receipt No. E049872 Receipt Amt: \$25.00

Active in the Water Supply Bank? Yes ☐ No ☐ If yes, forward to the State Office for processing W-9 received? Yes ☐ No ☐

Name on W-9: _____ Approved by: _____ Processed by: Returned Date: 4-1-2024

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

NOTICE OF CHANGE IN WATER RIGHT OWNERSHIP

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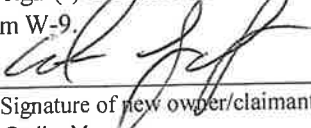
Water Right/Claim No.	Split?	Leased to Water Supply Bank?	Water Right/Claim No.	Split?	Leased to Water Supply Bank?
21-7376	Yes ☐	Yes ☐		Yes ☐	Yes ☐
	Yes ☐	Yes ☐		Yes ☐	Yes ☐
	Yes ☐	Yes ☐		Yes ☐	Yes ☐
	Yes ☐	Yes ☐		Yes ☐	Yes ☐
	Yes ☐	Yes ☐		Yes ☐	Yes ☐

2. Previous Owner's Name: Boyd Yancey
Name of current water right holder/claimant
3. New Owner(s)/Claimant(s): Hali Mackert, Trent Yancey, Colin Yancey
New owner(s) as listed on the conveyance document

702 N. 2300 E.
Mailing address
208-709-4848
Telephone

St. Anthony ID 83445
City State Zip
hali.mackert@gmail.com
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: July 13, 2023
6. Do you own the land identified as the water right place of use? Yes ☒ No ☐
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☒ 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.
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☒ Filing fee (see instructions for further explanation):
 o \$25 per *undivided* water right.
 o \$100 per *split* water right.
 o No fee is required for pending adjudication claims.
☐ If water right(s) are leased to the Water Supply Bank AND there are multiple owners, a Lessor Designation form is required.
☐ If water right(s) are leased to the Water Supply Bank, the individual owner or designated lessor must complete, sign and submit an IRS Form W-9.

8. Signature:  Title, if applicable _____ Date _____
 Signature of new owner/claimant
Colin Yancey
 Print name

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

 Print name

For IDWR Office Use Only:

Received by _____ Date _____ Receipt No. _____ Receipt Amt. _____
 Active in the Water Supply Bank? Yes ☐ No ☐ If yes, forward to the State Office for processing W-9 received? Yes ☐ No ☐
 Name on W-9 _____ Approved by _____ Processed by _____ Date _____

Additional Signature Page

STATE OF IDAHO
CERTIFICATION OF VITAL RECORD

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

CERTIFICATE OF DEATH

Date Filed **SEPTEMBER 08, 2008**

State File No. **2008-07191**

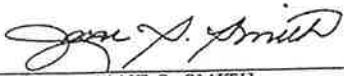
DECEDENT - LEGAL NAME BOYD NORLYN YANCEY			
SEX MALE	SOCIAL SECURITY NUMBER	AGE 79 YEARS	DATE OF BIRTH MAY 21, 1929
BIRTHPLACE REXBURG, IDAHO		PLACE OF RESIDENCE ST. ANTHONY, IDAHO	
MARITAL STATUS AT TIME OF DEATH MARRIED		NAME OF SURVIVING SPOUSE (If wife, maiden name) SHIRLEY V. RIGBY	WAS DECEDENT EVER IN U.S. ARMED FORCES? NO
FATHER - NAME MONEY LEE YANCEY		BIRTHPLACE TENNESSEE	
MOTHER - MAIDEN NAME FLORENCE MALINDA WILCOX		BIRTHPLACE IDAHO	
METHOD OF DISPOSITION BURIAL		FUNERAL SERVICE LICENSEE GARY D. BIDWELL	
NAME AND ADDRESS OF FUNERAL FACILITY BIDWELL FUNERAL HOME, ST. ANTHONY, IDAHO			
DATE OF DEATH AUG. 31, 2008	TIME OF DEATH APPROX 2:00 A.M.	CITY, TOWN OR LOCATION OF DEATH ST. ANTHONY, IDAHO	COUNTY OF DEATH FREMONT
CAUSE OF DEATH (underlying cause last) MYOCARDIAL INFARCTION (PROBABLE)			Approximate Interval Between Onset and Death 5 MINUTES
a. DUE TO (or as a consequence of):			
b. DUE TO (or as a consequence of):			
c. DUE TO (or as a consequence of):			
d. DUE TO (or as a consequence of):			
OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH but not resulting in the underlying cause given above HYPERTENSION			WAS AN AUTOPSY PERFORMED? NO
MANNER OF DEATH NATURAL		NAME OF CERTIFIER DENNIS E BIRCH	TITLE CORONER
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			

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.

SEPTEMBER 09, 2008

DATE ISSUED: _____

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


JANE S. SMITH
STATE REGISTRAR



STATE OF IDAHO
CERTIFICATION 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 31, 2023

State File No. 2023-09144

DECEDENT - LEGAL NAME SHIRLEY VILATE YANCEY			
SEX FEMALE	SOCIAL SECURITY NUMBER	AGE 89 YEARS	DATE OF BIRTH JANUARY 23, 1934
BIRTHPLACE PARKER, IDAHO		PLACE OF RESIDENCE ST. ANTHONY, IDAHO	
MARITAL STATUS AT TIME OF DEATH WIDOWED		NAME OF SURVIVING SPOUSE (if wife, maiden name) WAS DECEDENT EVER IN U.S. ARMED FORCES? NO	
FATHER - NAME RULON REMINGTON RIGBY		BIRTHPLACE IDAHO	
MOTHER - MAIDEN NAME VIRGINIA VILATE WAYMENT		BIRTHPLACE UTAH	
METHOD OF DISPOSITION BURIAL		FUNERAL SERVICE LICENSE BERT L. FLAMM	
NAME AND ADDRESS OF FUNERAL FACILITY BERT FLAMM MORTUARY, ST. ANTHONY, IDAHO			
DATE OF DEATH JULY 13, 2023	TIME OF DEATH 3:27 P.M.	CITY, TOWN OR LOCATION OF DEATH ST. ANTHONY, IDAHO	COUNTY OF DEATH FREMONT
CAUSE OF DEATH (underlying cause last) NUTRITIONAL DEFICIENCY		As proximate interval between Cause and Death 3 MONTHS	
DUE TO (or as a consequence of) CEREBROVASCULAR DISEASE		9 YEARS	
DUE TO (or as a consequence of) 			
DUE TO (or as a consequence of) 			
OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH (noted resulting in the underlying cause given above) NONE STATED			WAS AN AUTOPSY PERFORMED? NO
MANNER OF DEATH NATURAL		NAME OF CERTIFIER STEVEN H. LOFGREN, 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			

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: AUGUST 01, 2023

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

James B. Aydelotte
JAMES B. AYDELOTTE
STATE REGISTRAR

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE



LAST WILL AND TESTAMENT

BE IT KNOWN that I, Shirley Vilate Yancey, a resident of
518 E 2nd N St Anthony, County of Fremont, in the State of
Idaho, being of sound mind, do make and declare this to be my Last Will and
Testament expressly revoking all my prior Wills and Codicils at any time made.

I. PERSONAL REPRESENTATIVE:

I appoint See Below of
as Personal Representative of this my Last Will and Testament and
provide that if this Personal Representative is unable or unwilling to serve then I appoint
of

Personal Representative shall be authorized to carry out all provisions of this Will and pay my just debts, obligations
and funeral expenses. I further provide my Personal Representative shall not be required to post surety bond in this
or any other jurisdiction, and direct that no expert appraisal be made of my estate unless required by law.

II. GUARDIAN:

In the event I shall die as the sole parent of minor children, then I appoint
as Guardian of said minor children. If this named Guardian is
unable or unwilling to serve, then I appoint
as alternate Guardian.

III. BEQUESTS:

I direct that after payment of all my just debts, my property be bequeathed in the manner following:

The Executors of my Estate are my children, Hali Mackert
Trent Yancey, and Colin Yancey.

If I should die before my Husband who is Boyd Yancey, I
leave all my worldly possessions to him to dispose as she
chooses. If he precedes me in death, at the time of my demise
I bequeath my Estate as follows. To each of my natural born
Grandchildren I bequeath 10,000 dollars, with the stipulation
that the money shall be used to first pay any outstanding
debts before any other use of the money. The Executors shall
determine that this stipulation is carried out. If any of the
Grandchildren are minors at the time of the distribution their
Parents will determine the use of the inheritance until such
time the minors reach 18 yrs of age.

The remainder of the Estate is to be divided equally between
Hali Mackert, Colin Yancey, and Trent Yancey to dispose of as
they see fit.

Page 1 of 3 pages

Testator's Initials _____

Execute and attest before a notary.

Caution: Louisiana residents should consult an attorney before preparing a will.

IN WITNESS WHEREOF, I have hereunto set my hand this 8th day of January 2004 (year), to this my Last Will and Testament.

Shirley Yancey
Testator Signature

IV. WITNESSED:

The testator has signed this will at the end and on each other separate page, and has declared or signified in our presence that it is his/her last will and testament, and in the presence of the testator and each other we have hereunto subscribed our names this 8th day of January, 2004.

Susan T Davis
Witness Signature

40 S Bridge, St Anthony, ID
Address

Corina Bair
Witness Signature

40 S Bridge, St Anthony, ID
Address

Michelle Farley
Witness Signature

40 S Bridge, St Anthony, ID
Address

ACKNOWLEDGMENT

State of Idaho }
County of Fremont }

We, Shirley Yancey, Susan T Davis,
Michelle Farley, and Corina Bair

the testator and the witnesses, respectively, whose names are signed to the attached and foregoing instrument, were sworn and declared to the undersigned that the testator signed the instrument as his/her Last Will and that each of the witnesses, in the presence of the testator and each other, signed the will as a witness.

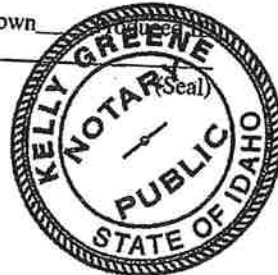
Testator: Shirley Yancey Witness: Susan T Davis
Witness: Corina Bair
Witness: Michelle Farley

On 1/8/04 before me, Kelly Greene
appeared Shirley Yancey, Susan Davis, Michelle Farley & Corina Bair
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 Kelly Greene
Signature of Notary

Affiant X Known
Type of ID

Page ____ of ____ pages



REVOCABLE LIVING TRUST AGREEMENT

RECORDED TO ADD LEGAL DESCRIPTION 8-5-96

Boyd Yancey

This Revocable Living Trust Agreement is made this 21 day of March 19 96, between Boyd Yancey, the husband, and Shirley Yancey, the wife, whose address is 518 E 2nd N, in the City of St Anthony, State of Idaho, herein referred to as the Grantors, and Boyd Yancey and Shirley Yancey, of 518 E 2nd N, City of St Anthony, State of Idaho, herein referred to as Co-Trustees.

Whereas, the grantors are now owners of the property described in Exhibit A attached hereto and made a part hereof, and

Whereas, grantors desire to make provision for the care and management of such property, and the collection of the income therefrom, and the disposition of both such income and such property in the manner herein provided:

Now, therefore, the reasons set forth above, and in consideration of the mutual covenants set forth herein, grantors and trustees agree as follows:

1. *Transfer of Property:* Grantors, in consideration of the acceptance by co-trustees of the trust herein created, hereby convey, transfer, assign, and deliver to co-trustees, their successors in trust and assigns, the property described in Exhibit A attached hereto and made a part hereof, by this reference, which property, together with all other property that may from time to time be held by co-trustees hereunder, is herein referred to as Trust Estate. Grantors, and any other persons shall have the right at any time to add property acceptable to trustees to this trust and such property, when received and accepted by trustees, shall become a part of the trust estate.

2. *Disposition of Income and Principal:* Trustees shall care for and manage the trust estate and collect the income derived therefrom, and after the payment of all taxes and assessments thereon and all charges incident to the management thereof, dispose of the net income therefrom and corpus thereof, as follows:

During the lifetime of grantors the trustees may pay income of the trust estate and such portions of the principal as the grantors from time to time may direct to the grantors, or otherwise as they direct during their lives. After the death of both grantors the successor trustee shall distribute the trust estate to the beneficiaries listed in Exhibit B attached hereto and made a part of this document.

The share of any beneficiary who shall be under the age of 21 years of age shall not be paid to such beneficiary but shall instead be held in trust to apply to his/her use all the income thereof, and also such amounts of the principal, even to the extent of all, as the trustees deem necessary or suitable for the support, welfare and education of such beneficiary; and when he/she attains the age of 21 years of age, to pay him/her the remaining principal, if any. If any beneficiary for whom a share is held in trust should die before having received all the principal thereof, then upon his/her death the remaining principal shall be paid to his/her then living child or children, equally dividing if more than one, and in default

Microfilm No. 442358
5 Day May 19 96
 At 12:00 O'clock PM
 MICKIE FUNKE
 FREMONT CO. RECORDER
 Fee \$ 15
 Recorded At Request of Boyd Yancey

Page 1 of 5 pages

Microfilm No. 440860
25 Day Apr 19 96
 At 14:30 O'clock PM
 MICKIE FUNKE
 FREMONT CO. RECORDER
 Fee \$ 15
 Recorded At Request of Boyd Yancey

thereof, to the then living descendants of the grantors, per stirpes. No interest hereunder shall be transferable or assignable by any beneficiary, or be subject during his or her life to the claims of his or her creditors. Notwithstanding anything herein to the contrary, the trusts hereunder shall terminate not later than twenty-one (21) years after the death of the last beneficiary named herein.

3. *Revocation and Amendment:* The grantors or the survivor of them, may by signed instrument delivered to the trustees, revoke the trusts hereunder, in whole or in part, or amend this Agreement from time to time in any manner.

4. *Successor Trustees:* In the event of the death or incapacity of both co-trustees, we hereby nominate and appoint as successor trustee:

Hali Mackert St Anthony ID

Colin Yancey St Anthony ID

Trent Yancey Chester ID

In the event the successor trustee does not serve we appoint whomever shall at the time be the first designated beneficiary hereunder. The trustees and their successors shall serve without bond.

5. *Trustees' Acceptance:* This trust has been accepted by trustees and will be administered in the State of Idaho and its validity, construction, and all rights thereunder shall be governed by the laws of that state.

In Witness Whereof, grantors and trustees have executed this Agreement on the date above written.

Bryd Yancey
Grantor

Bryd Yancey
Co-Trustee

Shirley Yancey
Grantor

Shirley Yancey
Co-Trustee

Shirley Yancey
Witness

Witness

Hali Mackert
Witness

Sandy Withers
Witness

The following items and/or property is a listing of the Trust Estate incorporated into the Revocable Living Trust Agreement as made by

Boyd Yancey and Shirley Yancey, and dated the 21st day of
Mach, 19 96.

44.0 acres of farmland located in Tax 4 Section 2 Township 7

Range 39 East of Boise Meridian.

The west 15ft of lot 13, and lots 14, and 15 Block 5 of the
Townsite of St Anthony, county of Fremont, State of Idaho.

All personal property including snow machines, and trailer,
Automobiles, and all terrain vehicle.

All bank accounts including savings, checking, and individual
retirement accounts.

Fremont

County, Idaho, to wit: Commencing at a point 2866 ft. East of the
South West corner of Section 2 Township 7 North, Range 39, East of the
Boise Meridian. Running East 786 ft., thence North 2640 ft., Thence
West 786 ft., thence South 2640 ft South to point of beginning. Consisting
of 45.0 acres more or less as follows

EXHIBIT B

The following are the names and addresses of the beneficiaries of the Revocable Living Trust Agreement as made by Boyd Yancey and Shirley Yancey and dated the 21st day of March, 1996.

Hali Mackert

Colin Yancey

702 N 2300 E

518 E 2nd N

St Anthony ID

St Anthony Id 83445

Trent Yancey

753 N 3100 E

753

St Anthony Id

FOR
***** NOTARY PUBLIC *****

Name: Boyd Yancey

Name: Shirley Yancey

Address: 518 E 2nd N

St Anthony Idaho

Phone: 624-3988

State of Idaho)

) SS.

County of Fremont)

On this day, before me, the undersigned authority, in and for and residing in the above County and State, personally appeared Boyd Yancey and Shirley Yancey, who is personally known to me to be the same person(s) whose name is subscribed to the foregoing document, and, being duly sworn, they verified that the information contained in the foregoing document is true and correct on personal knowledge and acknowledged that said document was signed as a free and voluntary act.

Subscribed and sworn to this 21st day of Mar, 1996

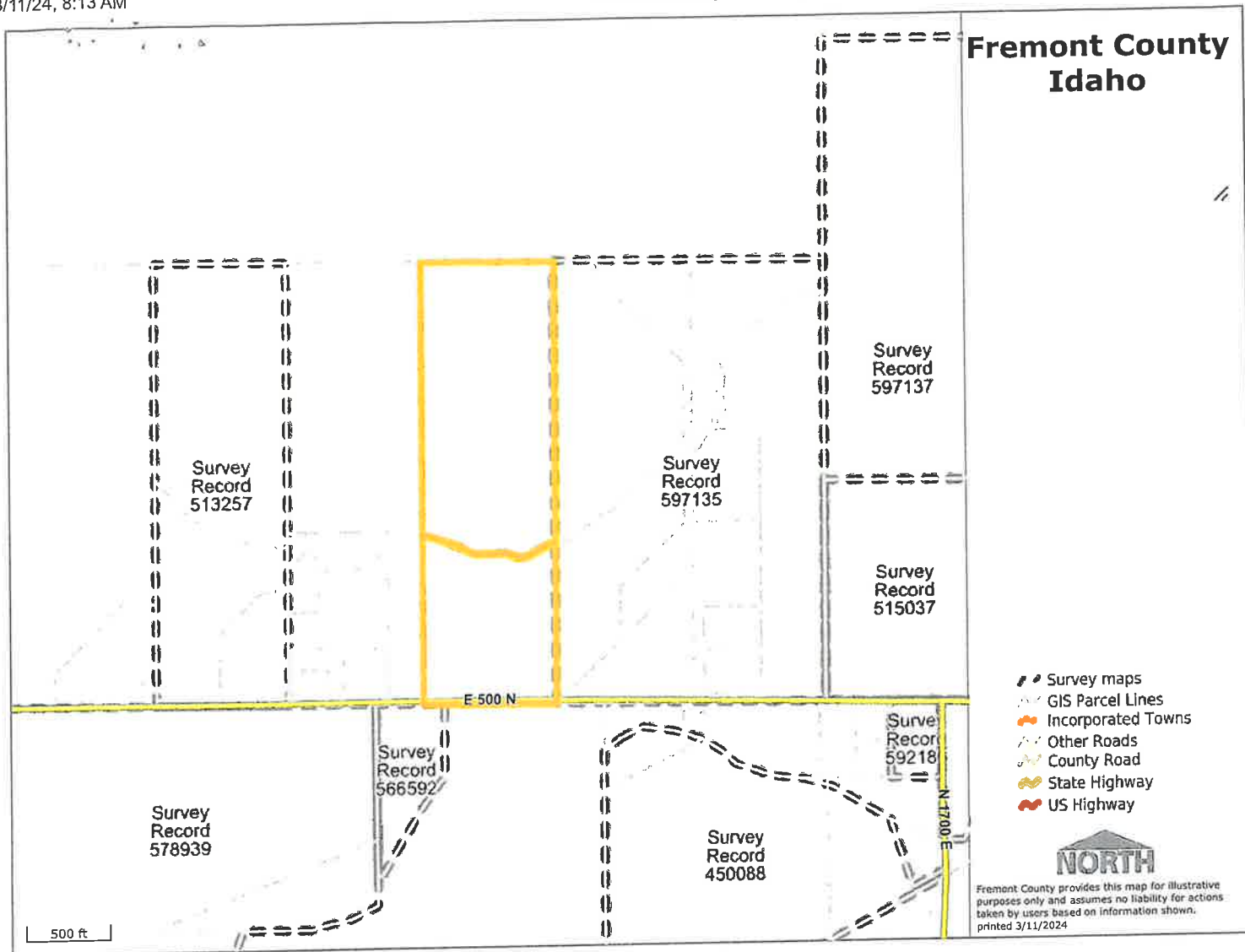
Kelly Greene
Name and signature

My commission expires: 5-3-2002



RP07N39E027951 Property Detail

Tax Code Area: 009000 Tax Year: 2023	
Mailing Address: YANCEY BOYD & SHIRLEY TRUST 518 E 2ND N ST ANTHONY, ID 83445	
Location: TAX 2508 LESS PART TAX 6098 SEC 2 TWP 7 RGE 39	
Deeds 543 2011-06-24 388784 389503 425348 440860 442358	
Classes for Assessment Year 2023 (Last appraised in 2023) Irrigated Agricultural Land 46.370 \$ 35,983 Waste 1.080 \$ 0 Total Assessed Value: \$ 35,983	
2023 Taxes & Certified Charges: Taxing Districts COUNTY Levy \$ 159.02 SCHOOL 215 TORT 0.002757667 Contact Phone 624-7332 SCHOOL 215 BOND 2004-2023 0.000008684 624-7542 SCHOOL 215 PLNT FCLT 2021-2031 0.000000000 624-7542 SCHOOL 215 BOND 2008-2024 0.000000000 624-7542 SCHOOL 215 SUPP 2023-2024 0.000000000 624-7542 CEM #4 PARKER 0.000237424 716-7013 S F FIRE 0.000694295 624-4404 FREMONT LIBRARY 0.000148277 652-7280 AMBULANCE 0.000113112 624-7332 AMBULANCE OVERRIDE 2023-2024 0.000100473 624-7332 FREMONT - ZONE 2 SCHOOL DISTRICT Fremont Library District Zone 3 Precinct 2 Polling Place Egin LDS Church Address 1633 E 400 N This information is provided as a courtesy to our taxpayers. If this parcel has changed code areas, or been split or combined with another parcel, the tax and assessment data shown may not apply or be current. For more information, please contact the appropriate county office.	
22 milliseconds	





IDAHO DEPARTMENT OF
WATER RESOURCES

Eastern Region • 900 N Skyline Drive, Suite A • Idaho Falls, ID 83402-1718

Phone: 208-525-7161 • Fax: 208-525-7177 • Email: easterninfo@idwr.idaho.gov • Web: idwr.idaho.gov

Governor Brad Little

Director Mathew Weaver

April 1, 2024

HALI MACKERT
702 N 2300 E
ST ANTHONY ID 83445

TRENT YANCEY
702 N 2300 E
ST ANTHONY ID 83445

COLIN YANCEY
702 N 2300 E
ST ANTHONY ID 83445

RE: Change in Ownership Water Right No. 29-13348

Dear Sir/Madam:

The Department of Water Resources acknowledges receipt of your Notice of Change in Water Right Ownership on March 13, 2024, for the above-mentioned water rights. The Notice could not be processed because additional information and/or fees are required. The department send a deficiency letter requesting the additional information/fee on March 13, 2024. After our conversation on March 25, 2024, rather than splitting the water right, you requested we send an Address Change form and that was how we would update the information at this time. The address change was received on March 29, 2024, and updated on April 1, 2024 (proof report attached). If you feel this is an error, please contact the department.

Because the department is returning your application you are entitled to a full refund. The department has initiated the refund, and it should arrive from the state office in a couple of weeks.

Please note that Section 42-248, Idaho Code, requires you or the owner of this water right to maintain current ownership and address records on file with the department. Forms to file a change of ownership of a water right and/or a change in the address of the water right owner are available from any department office, or at the department's website at: www.idwr.idaho.gov.

Please feel free to contact the Department if you have any questions.

Sincerely,

Jonie Baily
Technical Records Specialist

cc: BOYD YANCEY
PO BOX 58
CHESTER ID 83421

Baily, Jonie

From: Baily, Jonie
Sent: Monday, April 1, 2024 8:47 AM
To: IdwrPayable
Subject: Refund Request
Attachments: Receipt

Good morning!

I have a refund request as follows:

Receipt number: E049872
Amount: \$25.00
Payable to: YANCEY LLC
702 N 2300E
ST ANTHONY ID 83445

Reason: Ownership Change filed. Additional information and/or fees requested, the applicant decided to only do an address change at this time. Therefore, they are entitled to a full refund.

Let me know if you have any questions or need additional information. Have a great day!!!



Jonie Baily | Technical Records Specialist
900 N Skyline Drive Ste. A, Idaho Falls, ID 83402
Phone number: (208) 525-7161
Fax number: (208) 525-7177
Email: jonie.barg@idwr.idaho.gov
Website: www.idwr.idaho.gov



IDAHO DEPARTMENT OF
WATER RESOURCES

Eastern Region • 900 N Skyline Drive, Suite A • Idaho Falls, ID 83402-1718

Phone: 208-525-7161 • Fax: 208-525-7177 • Email: easterninfo@idwr.idaho.gov • Web: idwr.idaho.gov

Governor Brad Little

Director Mathew Weaver

March 13, 2024

HALI MACKERT
702 N 2300 E
ST ANTHONY ID 83445

TRENT YANCEY
702 N 2300 E
ST ANTHONY ID 83445

COLIN YANCEY
702 N 2300 E
ST ANTHONY ID 83445

RE: Change in Ownership Water Right No. 21-7376

Dear Sir/Madam:

The Department of Water Resources acknowledges receipt of your Notice of Change in Water Right Ownership.

Our review of your notice indicates that additional information is required before we can process the change. The information required is indicated below:

**** **Evidence of Ownership:** The department acknowledges receipt of your ownership change for water right number 21-7376, along with a copy of the revocable living trust agreement and a copy of the death certificate for Boyd Yancey. The current owner of the water right listed above is Boyd Yancey. According to the taxlot data the current owner should be the Boyd and Shirley Yancey Trust, please provide a copy of the deed where the property was put in the name of the trust. The document needed is a Warranty Deed, Quit Claim Deed or other legal document indicating their ownership in the property. Also, on the ownership change the new owners are listed as Hali Mackert, Colin Yancey, and Trent Yancey according to the trust agreement received they become the trustees in the event of death or incapacity of both Boyd and Shirley Yancey. If those three should be listed as owner's please supply a copy of the deed going from the trust to Hali Mackert, Colin Yancey, and Trent Yancey as well.

**** **Additional Filing Fee:** Also, please review the map according to the document received there is only a portion of this water right that is appurtenant to the Boyd and Shirley Yancey Trust property. It appears a portion of the water right is on property owned by Michael and Sharee Miller, Aaron and Lorilee Draper and another portion owned by Reynold and Sara Leavitt. If a split is required, there is an additional filing fee. The filing fee for a split ownership change is \$100.00 per water right therefore an additional fee of \$75.00 is required. If you do not believe a split is required additional information will be required indicating your ownership in the entire place of use of the water right and/or release of interest from the property owners.

Because the Department cannot process the ownership change without proper documentation/fees, we will hold any action on your notice pending receipt of the necessary information/fees. If we do not receive the necessary information/fees within 30 days we will return your notice and all attachments and your notice will not be processed.

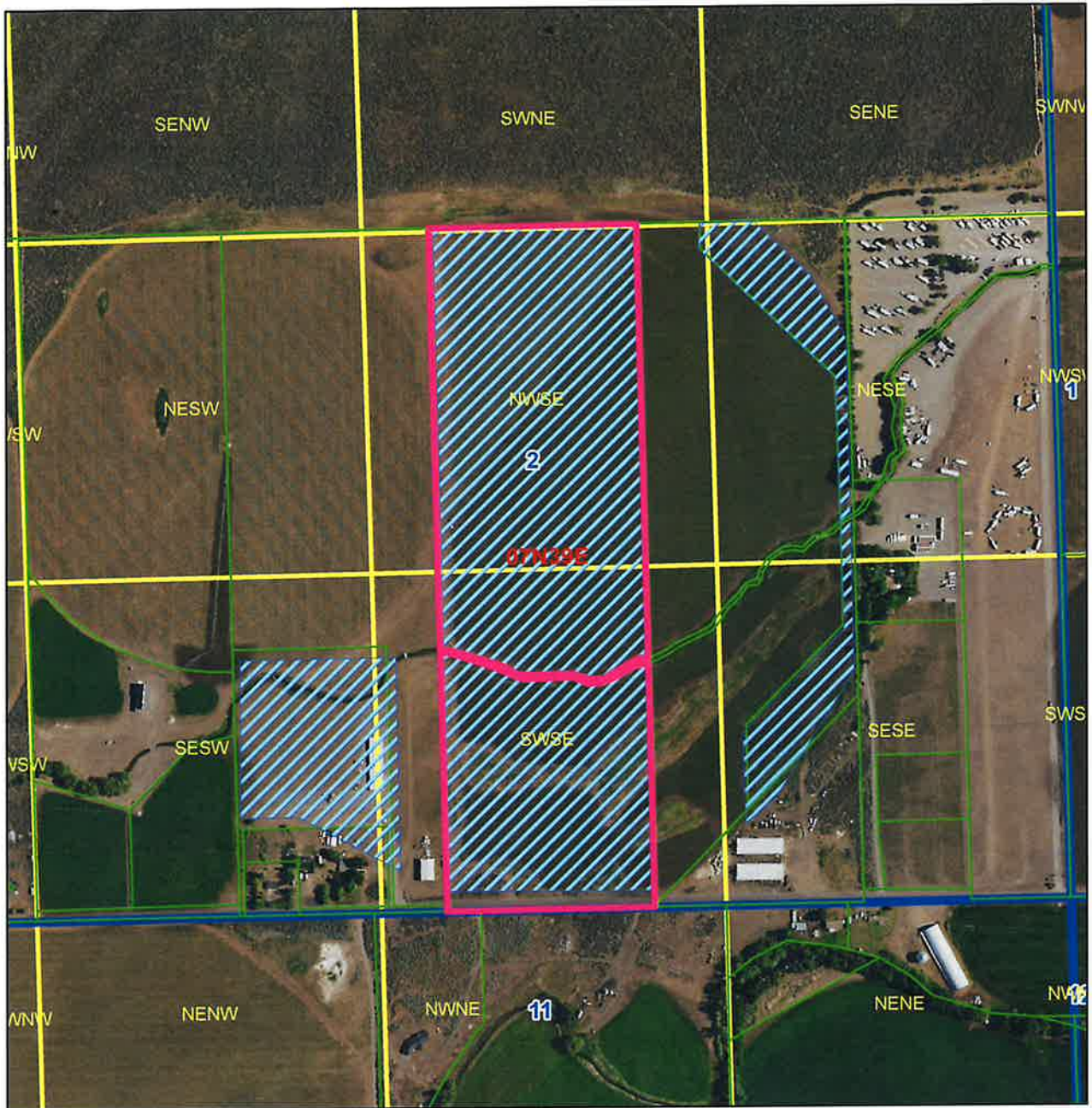
Please note that Section 42-248, Idaho Code, requires you or the owner of this water right to maintain current ownership and address records on file with the department. Forms to file a change of ownership of a water right and/or a change in the address of the water right owner are available from any department office, or at the department's website at: www.idwr.idaho.gov.

Please feel free to contact the Department if you have any questions.

Sincerely,

Jonie Baily
Technical Records Specialist

Idaho Department of Water Resources



Legend

-  Boyd and Shirley Yancey Trust Property
-  21-7376 POU
-  Parcels
-  Township/Range
-  Sections
-  QQ