

RECEIVED

OCT 22 2025

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

IDWR/NORTH 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?
87-11817	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: Mark Kimsey
Name of current water right holder/claimant

3. New Owner(s)/Claimant(s): Kari Gay Kimsey, Mark James Kimsey JR
New owner(s) as listed on the conveyance document Name connector ☐ and ☒ or

PO Box 180 Princeton ID 83857
Mailing address City State Zip
208-875-1675 mark_kimsey@hotmail.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: Priority Date: 12/31/1931, Decreed Date: 8/18/2023
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: Kari Gay Kimsey 10/19/25
Signature of new owner/claimant Title, if applicable Date
Kari Gay Kimsey
Print name

Signature: Mark James Kimsey JR 10/19/25
Signature of new owner/claimant Title, if applicable Date
Mark James Kimsey, JR
Print name

For IDWR Office Use Only:

Received by NS Date 10.22.25 Receipt No. N045673 Receipt Amt. \$2500
 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 NS Date 11-06-25

QUITCLAIM DEED

GRANTOR, (name of owner) Kari Gay Kimsey, for
value received, hereby conveys, releases, remises and forever quitclaims to:

Kari Gay Kimsey and Mark James Kimsey, Jr.
whose address is 1200 Hatter Creek Rd. Princeton
Idaho 83857

the following described premises, to-wit:

I, Kari Gay Kimsey, a widow, for valuable
consideration, do hereby quitclaim to Kari Gay
Kimsey and Mark James Kimsey, Jr., mother
and son, as joint tenants with right of survivor-
ship, and not as tenants in common, all my
right, title, and interest in and to the following
described real property: SEE ATTACHED
LEGAL DESCRIPTION

_____, Latah County.

Together with the appurtenances.

This deed is intended to convey to the Grantee all right, title, and interest of the Grantor
in and to said property, now owned or hereafter acquired.

Date 10-9-25

Kari G. Kimsey
Signature, Grantor

STATE OF IDAHO)

County of ~~Blaine~~ Blaine) ss.

On this 9th day of October, 2025, before me, the undersigned, a Notary
Public in and for the State, personally appeared Kari Gay Kimsey,
known or identified to me to be the person whose name is subscribed to the foregoing
instrument and acknowledged to me that s/he executed the same.

IN WITNESS WHEREOF, I have hereunto set my hand and seal on the date last above
written.

LORI ANN COLLINS
COMM. #20241538
NOTARY PUBLIC
STATE OF IDAHO

Lori Ann Collins
Notary Public for Idaho

Residing at MOSCOW ID

Commission expires 05/02/2030

QUITCLAIM DEED

CAO GL 02 Revised 7/1/2019

COMMUNITY PROPERTY AGREEMENT

THIS AGREEMENT made and entered into this 3 day of ~~January~~^{February} 1995, by and between MARK J. KIMSEY and KARI G. KIMSEY, husband and wife, witnesseth:

That in consideration of the love and affection that each of the said parties has for the other, and in consideration of the mutual benefits to be derived by the parties hereto, it is hereby agreed that the following described real property shall be considered and is hereby declared to be community property and upon the death of either the aforementioned parties, title to said real property shall immediately vest in fee simple in the survivor of them. Said real property is described as follows, to wit:

Parcel No. 1

Situate in the County of Latah, State of Idaho, to wit:

A parcel of land lying in Government Lot 1, Section 3, Township 40 North, Range 4 West, Boise Meridian, Latah County, Idaho, more particularly described as follows:

Beginning at the Northeast corner of said Government Lot 1; thence South on the East line of said Lot to a point which is 90 feet North of the Southeast corner of said lot; thence West and parallel to the North line of said lot, 660 feet; thence North and parallel to the East line of said lot to a point which is 231 feet South of the North line of said lot; thence West and parallel to the North line of said lot to the West line of said Government Lot 1; thence North on the West line of said lot to the Northwest corner of said lot; thence East along the North line of said Government Lot 1 to the true Point of Beginning.

Parcel No. 2

Situate in the County of Latah, State of Idaho, to wit:

A parcel of land lying in Government Lot 1, Section 3, Township 40 North, Range West Boise Meridian, and being more particularly described as follows:

Beginning at the southwest corner of said Government Lot 1, thence North a distance of 90 feet; thence East a distance of 660 feet to the True Point of Beginning; thence North $41^{\circ}14'$ West, 521.9 feet; thence North 63.5 feet; thence North $38^{\circ}41'$ East, 253.6 feet; thence North $17^{\circ}15'$ East, 207.3 feet; thence

East 124.0 feet; thence South 851.93 feet to the True Point of Beginning.

Dated this day and year first above written.

Mark J. Kimsey
MARK J. KIMSEY

MARK J. KIMSEY

Kari G. Kimsey
KARI G. KIMSEY

KARI G. KIMSEY

STATE OF WASHINGTON)

SS.

COUNTY OF SPOKANE)

I certify that I know or have satisfactory evidence that MARK J. KIMSEY and KARI G. KIMSEY signed this instrument and acknowledged it to be their free and voluntary act for the uses and purposes mentioned in the instrument.

Dated February 3, 1995

Signature of Notary Public

Levi's Vernon

My appointment expires: 4-1-95



411669

NO

AT THE REQUEST OF:

HARVEY & KARI KIMSEY

DATE & HOUR:

4/7/95

3:07 PM

SUSAN PETERSEN
LATAH COUNTY RECORDER

FEE \$ 6.00 CA

BY ADKAL DEPUTY

m/ PO Box 51

PRINCETON, ID 83852

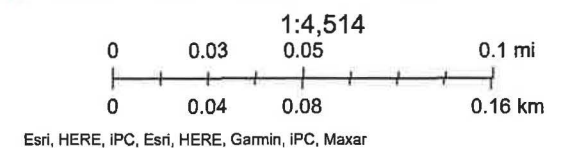
Kimsey 87-11817 Water Rights



10/20/2025, 6:29:32 AM

- POD - Water Rights
- POU - Water Rights
- All Other POU (non-provider)

- Quarter Quarters
- Townships
- PLS Sections



Kari White

AFFIDAVIT FOR RECORDING DEATH CERTIFICATE

I, (your name) Kari Gay Kimsey, swear/affirm:I am recording the attached certified copy of a death certificate to transfer title to real estate I co-owned with (name of deceased as shown on deed/s) Mark J. Kimsey SR

NON-PROBATE TRANSFER

Check one box:

- a. ☐ I am a remainderman under a Life Estate recorded under Latah County Recorder's # _____. The property should vest in the remaindermen.
- b. ☐ I am the sole surviving joint tenant of the property which was held as joint tenancy with Right of Survivorship under Latah County Recorder's # _____, and am entitled to sole ownership of the property.
- c. ☒ I am the surviving spouse of the deceased and:
co-owned the property with him/her as community property with right of survivorship under Latah County Recorder's # 411669 or
my spouse and I executed and recorded before he/she died a Community Property / Devolution on Death Agreement in Latah County under Recorder's # _____, and the described property should vest in me.

- OR -

TRANSFER IN LIEU OF PROBATE

☐ I am the surviving spouse of the deceased and co-owned the property with him/her as community property at the time of death; **more than 3 years have passed** since my spouse died, and no probate or administration was filed with a Court in any state. The community property described in the attached document should vest in me. (Attach legal description of co-owned community property)

STATE OF Idaho)
COUNTY OF Latah) ss.

Subscribed and sworn to before me on the 9th day of October, 2025 byLori Ann Collins

Signature

Kari G. Kimsey

LORI ANN COLLINS
COMM. #20241538
NOTARY PUBLIC
STATE OF IDAHO

Notary Public for IdahoCommission Expires 05/08/2030

STATE OF IDAHO

CERTIFICATION OF VITAL RECORD

STATE OF IDAHO

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
MAILED SEAL, SHALL BE USED AS PRIMA FACIE EVIDENCE OF THIS DEATH UNDER §30-24(K) AND §30-27, IDAHO CODE

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) MARK J KIMSEY SR.		2. SEX MALE	3. SOCIAL SECURITY NUMBER [REDACTED]
	4a. AGE - Last Birthday 72 (Years)		5. DATE OF BIRTH (Mo/Day/Yr) 03/23/1953	
MORTICIAN: Complete/Verify and File Within 5 Days of Death	6. BIRTHPLACE (City and State, Territory, or Foreign Country) SPOKANE, WASHINGTON		7a. RESIDENCE - STATE OR FOREIGN COUNTRY IDAHO	
	7b. COUNTY LATAH		7c. CITY OR TOWN PRINCETON	
	7d. STREET AND NUMBER 1200 HATTER CREEK RD		7e. APT. NO. 83857	
	7f. ZIP CODE 83857		7g. INSIDE CITY LIMITS? ☐ Yes ☒ No ☐ Unknown	
PARENTS	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) KARI ROWBERG			
INFORMANT	10. EVER IN U.S. ARMED FORCES? ☒ Yes ☐ No ☐ Unknown		11a. FATHER'S NAME (First, Middle, Last, Suffix) LLOYD KIMSEY	
	12a. MOTHER'S MAIDEN NAME (First, Middle, Last, Suffix) KATHERINE LANIGAN		11b. BIRTHPLACE (State, Territory, or Foreign Country) WASHINGTON	
DISPOSITION	13a. INFORMANT'S NAME (Type or print) MARK J KIMSEY JR.		13b. RELATIONSHIP TO DECEDENT SON	
	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) EVERGREEN CEMETERY ROCKFORD WA 99030	
PLACE OF DEATH	16. NAME AND COMPLETE ADDRESS OF FUNERAL FACILITY SHORT'S FUNERAL CHAPEL 1225 EAST SIXTH STREET MOSCOW IDAHO 83843		17a. SIGNATURE OF FUNERAL SERVICE LICENSEE OR PERSON ACTING AS SUCH ELECTRONICALLY FILED: PHILLIP N. HUTTON	
	17b. LICENSE NUMBER (Of licensee) M1295		18. WAS CORONER CONTACTED DUE TO CAUSE OF DEATH? ☐ Yes ☒ No	
DATE OF DEATH	19a. IF DEATH OCCURRED IN A HOSPITAL: ☐ Inpatient ☒ Outpatient ☐ DOA			
	19b. IF DEATH OCCURRED SOMEWHERE OTHER THAN A HOSPITAL: ☐ Hospice facility ☐ Nursing home/Long term care facility ☐ Decedent's home ☐ Other (Specify)			
CAUSE OF DEATH	20. FACILITY NAME (If not facility, give street and number) ASPEN PARK OF CASCADIA		21. CITY, TOWN, OR LOCATION OF DEATH, AND ZIP CODE MOSCOW, IDAHO, 83843	
	22. COUNTY OF DEATH LATAH		23. DATE OF DEATH (Mo/Day/Yr) (Spell month) July 11, 2025	
ITEMS 32-38 TO BE USED FOR EXTERNAL CAUSES ONLY (CORONER)	24. TIME OF DEATH (24hr) 11:00		25. DATE PRONOUNCED DEAD (Mo/Day/Yr) (Spell month) July 11, 2025	
	26. TIME PRONOUNCED DEAD (24hr) 11:00		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. IMMEDIATE CAUSE (Final disease or condition resulting in death) → a. CONGESTIVE HEART FAILURE DUE TO (or as a consequence of): b. DUE TO (or as a consequence of): c. DUE TO (or as a consequence of): d.	
CERTIFIER	28. DID TOBACCO USE CONTRIBUTE TO DEATH? ☐ Yes ☐ Probably ☒ No ☐ Unknown		29. IF FEMALE (Aged 10-54): ☐ Not pregnant within past year ☐ Pregnant at time of death ☐ Not pregnant, but pregnant within 43 days of death ☐ Not pregnant, but pregnant 43 days to 1 year before death ☐ Unknown if pregnant within the past year	
	30. DATE OF INJURY (Mo/Day/Yr) (Spell month) [Blank]		31. TIME OF INJURY (24hr) [Blank]	
REGISTRAR	32. PLACE OF INJURY (Decedent's home, farm, street, construction site, nursing home, restaurant, forest, etc.) [Blank]		33. INJURY AT WORK? ☐ Yes ☐ No ☐ Unknown	
	34. LOCATION OF INJURY: State _____ City / Town or County _____ Zip Code _____ Street and Number or Location _____ Apartment Number _____			
IF DEATH WAS DUE TO OTHER THAN NATURAL CAUSES, THE CORONER MUST COMPLETE AND SIGN THE CERTIFICATE	35. 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 [Blank]			
	36. TRANSPORTATION INJURY ONLY 36a. WAS DECEDENT: ☐ Driver/Operator ☐ Passenger ☐ Pedestrian ☐ Other (Specify) _____ 36b. WHAT SAFETY DEVICE(S) DID DECEDENT USE/EMPLOY? ☐ Seat belt ☐ Child safety seat ☐ Helmet ☐ Air bag ☐ None ☐ Unknown			
CERTIFIER	37a. CERTIFIER (Check only one, based on official capacity for this certificate) ☒ PHYSICIAN ☐ PHYSICIAN ASSISTANT ☐ ADVANCED PRACTICE REGISTERED 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.		37b. LICENSE NUMBER M-05447	
	Signature and Title of Certifier → ELECTRONICALLY FILED: ROBERT N. SPADY 37c. NAME, ADDRESS, AND ZIP CODE OF CERTIFIER (Type or print) ROBERT N. SPADY, 619 S WASHINGTON STREET SUITE 203, MOSCOW, ID 83843		37d. DATE SIGNED 07 / 14 / 2025 MM DD YYYY	
REGISTRAR	38a. REGISTRAR'S SIGNATURE [Signature: James B. Aydelotte]		38b. DATE SIGNED 07 / 14 / 2025 MM DD YYYY	
	CASE#: 18877			

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: JUL 23 2025

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

Rev. 08/05/24

[Signature: James B. Aydelotte]
 JAMES B. AYDELOTTE
 STATE REGISTRAR





IDAHO DEPARTMENT OF
WATER RESOURCES

Northern Region • 7600 N Mineral Drive, Suite 100 • Coeur D'Alene, ID 83815-7763
Phone: 208-762-2800 • Fax: 208-762-2819 • Email: northerninfo@idwr.idaho.gov • Web: idwr.idaho.gov

Governor Brad Little

Director Mathew Weaver

November 06, 2025

KARI GAY KIMSEY
MARK JAMES KIMSEY JR
PO BOX 180
PRINCETON ID 83857-0180

Re: Change in Ownership for Water Right No(s): 87-11817

Dear Water Right Holder(s):

The Department of Water Resources (Department) acknowledges the receipt of correspondence changing ownership of the above referenced water right(s) to you. The Department has modified its records and has enclosed a computer-generated report for you.

Updating the ownership record for a water right does not reconfirm the validity of the right. When processing a Notice of Change in Water Right Ownership, the Department does not review the history of water use to determine if the right has been forfeited or deliberately abandoned 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 Idaho Code §§ 42-222 and 42-223.

Please note, water right owners are required to report any change of water right ownership and any change of mailing address to the Department within 120 days of the change. Reporting forms are available from any office of the Department, or from the Department's website.

If you have any questions concerning the enclosed information, please contact me at 208-762-2813.

Sincerely,

Natalie Steading
Tech Records Specialist 1

Enclosure(s)