



PO Box 410207
Kansas City, MO 64141-0207

RECEIVED

APR 08 2026

DEPT OF WATER RESOURCES
SOUTHERN REGION

(E-mail)

April 8, 2026

Idaho Department of Water Resources
Southern Region
650 Addison Ave. W, Suite 500
Twin Falls ID 83301-5858

RE: Termination of Assignment

To Whom it May Concern:

NBH Bank as successor in interest by merger to Rock Canyon Bank, hereby terminates and releases its Assignment of Security Interest in Water Right/Permit No(s) 37-197C, 37-199B, 37-1138, 37-11879, 37-12278 & 37-11878, as collateral agent pursuant to the commercial security agreement (security agreement) dated as of March 10, 2022 to obligator.

If you should have any questions, please contact me directly at (816) 298-2031.

Best regards,

Kim Petterson

Kim Petterson
Post Closing Specialist

KP
Enclosure(s)

Water Right Holder(s): Jim L & Susan A Barton

Database updated by
DM 5-19-2026

DM

Support Data
In File # 37-197C



nbhbank.com

Document processing fee

If document is filed on paper

\$150.00

If document is filed electronically

Currently Not Available

Fees & forms/cover sheets are
subject to change.To file electronically, access instructions
for this form/cover sheet and other
information or print copies of filed
documents, visit www.coloradosos.gov
and select Business.

Paper documents must be typewritten or machine printed.

20221856531

\$300.00

SECRETARY OF STATE

08/31/2022 15:20:43

ABOVE SPACE FOR OFFICE USE ONLY

Statement of Merger
(Surviving Entity is a Domestic Entity)
 filed pursuant to § 7-90-203.7 of the Colorado Revised Statutes (C.R.S.)

1. For each merging entity, its ID number (if applicable), entity name or true name, form of entity, jurisdiction under the law of which it is formed, and principal address are

ID Number*(Colorado Secretary of State ID number)***Entity name or true name**

Rock Canyon Bank

Form of entity

Foreign Entity

Jurisdiction

Utah

Street address

215 W 2230 N

(Street number and name)

Provo

(City)

UT 84604

*(State)**(ZIP/Postal Code)*

United States

*(Country)**(Province - (if applicable))***Mailing address***(leave blank if same as street address)**(Street number and name or Post Office Box information)**(City)**(State)**(ZIP/Postal Code)**(Province - (if applicable))**(Country)***ID Number***(Colorado Secretary of State ID number)***Entity name or true name****Form of entity****Jurisdiction**

Street address

(Street number and name)

(City)

(State)

(ZIP/Postal Code)

(Province - if applicable)

(Country)

Mailing address

(Leave blank if same as street address)

(Street number and name or Post Office Box information)

(City)

(State)

(ZIP/Postal Code)

(Province - if applicable)

(Country)

ID Number

(Colorado Secretary of State ID number)

Entity name or true name**Form of entity****Jurisdiction****Street address**

(Street number and name)

(City)

(State)

(ZIP/Postal Code)

(Province - if applicable)

(Country)

Mailing address

(Leave blank if same as street address)

(Street number and name or Post Office Box information)

(City)

(State)

(ZIP/Postal Code)

(Province - if applicable)

(Country)

(If the following statement applies, adopt the statement by marking the box and include an attachment.)

- ☐ There are more than three merging entities and the ID number (if applicable), entity name or true name, form of entity, jurisdiction under the law of which it is formed, and the principal address of each additional merging entity is stated in an attachment.

2. For the surviving entity, its entity ID number (if applicable), entity name or true name, form of entity, jurisdiction under the law of which it is formed, and principal address are

ID Number**20111463402**

(Colorado Secretary of State ID number)

Entity name or true name**NBH Bank**

Form of entity

Corporation

Jurisdiction

Colorado

Street address

7800 East Orchard Road

Suite 300

(Street number and name)

Greenwood Village

CO

80111

(City)

(State)

(ZIP/Postal Code)

United States

(Province - if applicable)

(Country)

Mailing address

(leave blank if same as street address)

(Street number and name or Post Office Box information)

(City)

(State)

(ZIP/Postal Code)

(Province - if applicable)

(Country)

3. Each merging entity has been merged into the surviving entity.

4. (If the following statement applies, adopt the statement by marking the box.)

- ☐ The plan of merger provides for amendments to a constituent filed document of the surviving entity and an appropriate statement of change or other document effecting the amendments will be delivered to the Secretary of State for filing pursuant to Part 3 of Article 90 of Title 7, C.R.S.

5. (If the following statement applies, adopt the statement by marking the box and state the appropriate document number(s).)

- ☐ One or more of the merging entities is a registrant of a trademark described in a filed document in the records of the secretary of state and the document number of each filed document is

Document number

Document number

Document number

(If the following statement applies, adopt the statement by marking the box and include an attachment.)

- ☐ There are more than three trademarks and the document number of each additional trademark is stated in an attachment.

6. (If applicable, adopt the following statement by marking the box and include an attachment.)

- ☐ This document contains additional information as provided by law.

7. (Caution: Leave blank if the document does not have a delayed effective date. Stating a delayed effective date has significant legal consequences. Read instructions before entering a date.)

(If the following statement applies, adopt the statement by entering a date and, if applicable, time using the required format.)

The delayed effective date and, if applicable, time of this document are 09/01/2022 8:59 a.m. MDT

(mm/dd/yyyy hour minute a/p/m)

Notice:

Causing this document to be delivered to the Secretary of State for filing shall constitute the affirmation or acknowledgment of each individual causing such delivery, under penalties of perjury, that such document is such individual's act and deed, or that such individual in good faith believes such document is the act and deed of the person on whose behalf such individual is causing such document to be delivered for filing, taken in conformity with the requirements of part 3 of article 90 of title 7, C.R.S. and, if applicable, the constituent documents and the organic statutes, and that such individual in good faith believes the facts stated in such document are true and such document complies with the requirements of that Part, the constituent documents, and the organic statutes.

This perjury notice applies to each individual who causes this document to be delivered to the Secretary of State, whether or not such individual is identified in this document as one who has caused it to be delivered.

8. The true name and mailing address of the individual causing this document to be delivered for filing are

Petrucci		Angela	
(Last)	(First)	(Middle)	(Suffix)
7800 East Orchard Road			
(Street number and name or Post Office Box information)			
Suite 300			
Greenwood Village		co	80111
(City)		(State)	(ZIP/Postal Code)
United States			
(Country)			
(Province - if applicable)			

- ☐ (If applicable, adopt the following statement by marking the box and include an attachment.)
This document contains the true name and mailing address of one or more additional individuals causing the document to be delivered for filing.

Disclaimer:

This form/cover sheet, and any related instructions, are not intended to provide legal, business or tax advice, and are furnished without representation or warranty. While this form/cover sheet is believed to satisfy minimum legal requirements as of its revision date, compliance with applicable law, as the same may be amended from time to time, remains the responsibility of the user of this form/cover sheet. Questions should be addressed to the user's legal, business or tax advisor(s).

[Signature]
Applications Manager
07/21/2022



IDAHO DEPARTMENT OF
WATER RESOURCES

Southern Region • 650 Addison Ave W, Suite 500 • Twin Falls, ID 83301-5858

Phone: 208-736-3033 • Fax: 208-736-3037 • Email: southerninfo@idwr.idaho.gov • Web: idwr.idaho.gov

Governor Brad Little

Director Mathew Weaver

May 19, 2026

NBH BANK
PO BOX 410207
KANSAS CITY MO 64141-0207

Re: Release of Security Interest for Water Right No(s): 37-197C, 37-199B, 37-1138,
37-11878, 37-11879 & 37-12278

Dear NBH Bank:

The Department of Water Resources (Department) acknowledges receipt of your correspondence requesting the removal of security interest holder Rock Canyon Bank on the above referenced water right(s). The Department has modified its records and has enclosed a computer-generated report for you.

If you have any questions concerning the enclosed information, please contact me at (208) 293-9908.

Sincerely,

Denise Maline
Administrative Assistant 1

Enclosure(s)

c: Jim L & Susan A Barton

Maline, Denise

From: Southern Info
Sent: Wednesday, April 8, 2026 10:13 AM
To: Maline, Denise
Subject: FW: Release Letter
Attachments: 20260408 1101AM.pdf; Idaho Water Rights filing letter.pdf

Hi Denise,

This was in the southern inbox.

Thanks,

Suzanne



Suzanne George, Technical Records Specialist I
Idaho Dept. of Water Resources, Southern Region
650 Addison Ave W Ste 500
Twin Falls ID 83301-5858
(208) 736-3033
Suzanne.George@idwr.idaho.gov

From: Kim Petterson <kimberly.petterson@nbhbank.com>
Sent: Wednesday, April 8, 2026 10:07 AM
To: Southern Info <southerninfo@idwr.idaho.gov>
Subject: Release Letter

CAUTION: This email originated outside the State of Idaho network. Verify links and attachments BEFORE you click or open, even if you recognize and/or trust the sender. Contact your agency service desk with any concerns.

Good Morning,

Please accept the attached letter to release our interest in the noted water rights.

Thank you,

Kim Petterson
Loan Operations, Post Closing Specialist II

NBH Bank | 1111 Main Street, Suite 2700 | Kansas City, MO 64105
P: 816.298.2031 | F: 855.858.3736 | E: kimberly.petterson@NBHBank.com



Alternate Contact:

Stacie Orr | Commercial Paid Loans/Imaging Supervisor | P: 816.298.2234 | Stacie.Orr@NBHBank.com

Department Group E-mail Boxes:

Commercial Paid Loan inquiries Send e-mail to Paidcommloans@NBHBank.com

Commercial Imaging E-mail LoanOpsImaging@NBHBank.com

This email message may contain confidential information. It is to be used by the intended recipient only. Use of the information contained in this email by anyone other than the intended recipient is strictly prohibited. If you have received this message in error, please notify the sender immediately and promptly destroy any record of this email.