



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

August 31, 2026

WILLIAM LOUIS MICHALK
2692 DISTRICT TWO RD
BONNERS FERRY ID 83805-5193

RE: Change in Ownership Water Right No(s): 98-4271

Dear Interested Parties:

The Idaho Department of Water Resources (Department) received a Notice of Change in Water Right Ownership (Notice) from you on August 24, 2026 for the above referenced water rights. The Notice could not be processed because the Place of Use (POU) listed on the water right (NW/SW) is in a different quarter than the property granted in the quitclaim deed (SW/NW).

However, because the POU is located within the open Kootenai River Basin Adjudication (KRBA), you will be required to file a claim on the water right and may be able to correct the POU through the adjudication process. For more information on filing a claim, please reach out to adjudication staff in our office at (208) 762-2800.

The Department is returning your Notice of Change in Water Right Ownership and the attachments. A refund of \$25 has been requested and will be mailed to you under separate cover from the Idaho State Controller's Office. You may re-submit your request with the appropriate documents and fees.

Sincerely,

Natalie Steading
Tech Records Specialist 1

Enclosure(s)

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

RECEIVED

AUG 24 2026

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?
98 4271	Yes ☐	Yes ☐		Yes ☐	Yes ☐
	Yes ☐	Yes ☐		Yes ☐	Yes ☐
	Yes ☐	Yes ☐		Yes ☐	Yes ☐
	Yes ☐	Yes ☐		Yes ☐	Yes ☐
	Yes ☐	Yes ☐		Yes ☐	Yes ☐

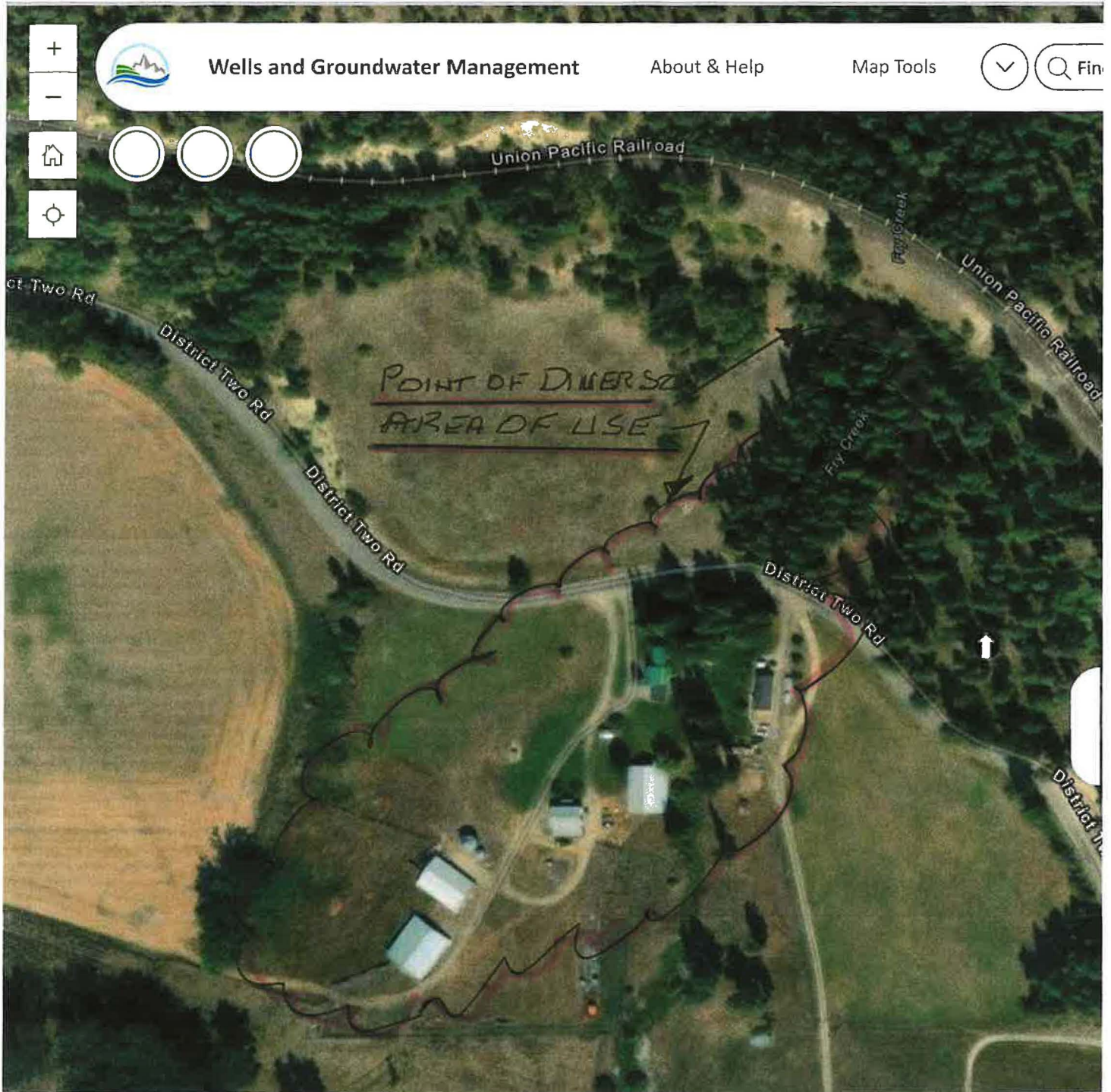
2. Previous Owner's Name: JEAN AND NICK PLATO
Name of current water right holder/claimant
3. New Owner(s)/Claimant(s): WILLIAM L. MICHALK
New owner(s) as listed on the conveyance document Name connector ☐ and ☐ or
- 2692 DISTRICT TWO RD. BONNERS FERRY ID 83805
Mailing address City State Zip
208 290 4354 FRYCREEKBILL@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: DECEMBER 17, 2025
6. Do you own the land identified as the water right place of use? Yes ☒ No ☐
o 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):
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: William L. Michalk OWNER 5/20/26
Signature of new owner/claimant Title, if applicable Date
WILLIAM L. MICHALK
Print name

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

For IDWR Office Use Only:

Received by MB Date 8/24/26 Receipt No. N046264 Receipt Amt. \$25.00 *8/31/26 Requested refund NS*
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 _____



Click any column to sort table												
Options	Type ?	Basin	Sequence	Suffix	Application Number	Basis	Status	Priority Date	Div. Rate (cfs)	Source	Water Use	Owner
Details More Options	Water Right	98	4271			Statutory Claim	Active	01/01/1905	0.18	FRY CREEK, SPRINGS	DOMESTIC, IRRIGATION, STOCKWATER	PLATO, JEAN A; PLATO, NICK

Water Right Report : 98-4271(Statutory Claim/Active)

Water Right Owners

Owner Type	Name	Address	City	State	Postal Code
Current Owner	PLATO, JEAN A	HCR 88 BOX 338	BONNERS FERRY	ID	83805
Current Owner	PLATO, NICK	STAR RT 3 BOX 338	BONNERS FERRY	ID	83805

Water Right Status

Priority Date : 1/1/1905
 Basis : Statutory Claim
 Status : Active

Water Source

Source	Source Qualifier	Tributary	Tributary Qualifier
FRY CREEK		KOOTENAI RIVER	
SPRINGS		FRY CREEK	

Points Of Diversion (Location)

Source	Township	Range	Section	Govt. Lot	QQQQQ	Q	County	Diversion Type
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SPRINGS	62N	02E	19	0	NE NWBOUNDARY
FRY CREEK	62N	02E	19	0	NE NWBOUNDARY

Water Uses

Beneficial Use	From	To	Diversion Rate	Volume
IRRIGATION	3/31	11/01	0.02	CFS
STOCKWATER	1/01	12/31	0.12	CFS
DOMESTIC	1/01	12/31	0.04	CFS
TOTAL				0.18 CFS

Places of Use

Place of Use Legal Description : IRRIGATION (BOUNDARY county)

Township	Range	Section	Lot	QQQ	QQ	Q	Acres
62N	02E	19			NW	SW	1.0

Irrigation Totals

Total Acres Acre Limit

1.00

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, THE DEPARTMENT OF HEALTH AND WELFARE, MAY BE USED AS EVIDENCE OF THE DEATH UNDER IDAHO LAWS, CHAPTER 52, IDAHO CODE.

DECEDENT

1. DECEDENT'S LEGAL NAME (Include AKA's if any) (First, Middle, Last, Suffix)
JEAN ARLENE PLATO

2. SEX
FEMALE

3. SOCIAL SECURITY NUMBER
[REDACTED]

4a. AGE-Last Birthday
90 (Years)

4b. UNDER 1 YEAR
Months **06** Days **13** Hours **19** Minutes **35**

5. DATE OF BIRTH (Mo/Day/Yr)
06/13/1935

6. BIRTHPLACE (City and State, Territory, or Foreign Country)
SWEETWATER, TEXAS

7a. RESIDENCE - STATE OR FOREIGN COUNTRY
IDAHO

7b. COUNTY
BOUNDARY

7c. CITY OR TOWN
BONNERS FERRY

7d. STREET AND NUMBER
2692 DISTRICT 2 ROAD

7e. APT. NO.
83805

7f. ZIP CODE
83805

7g. INSIDE CITY LIMITS?
☐ Yes ☒ No ☐ Unknown

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)

PARENTS

10. EVER IN U.S. ARMED FORCES?
☐ Yes ☒ No ☐ Unknown

11a. FATHER'S NAME (First, Middle, Last, Suffix)
JOE PETERSON

11b. BIRTHPLACE (State, Territory, or Foreign Country)
TEXAS

12a. MOTHER'S MAIDEN NAME (First, Middle, Last, Suffix)
EDRA UNKNOWN

12b. BIRTHPLACE (State, Territory, or Foreign Country)
TEXAS

INFORMANT

13a. INFORMANT'S NAME (Type or print)
WILLIAM MICHALK

13b. RELATIONSHIP TO DECEDENT
SON

13c. MAILING ADDRESS (Street and Number, City, State, Zip Code)
2692 DISTRICT 2 ROAD, BONNERS FERRY, ID, 83805

DISPOSITION

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)
**GRANDVIEW CEMETERY
CEMETERY ROAD
BONNERS FERRY ID 83805**

16. NAME AND COMPLETE ADDRESS OF FUNERAL FACILITY
**BONNERS FERRY FUNERAL HOME
6485 HARRISON STREET
BONNERS FERRY IDAHO 83805**

17a. SIGNATURE OF FUNERAL SERVICE LICENSEE OR PERSON ACTING AS SUCH
ELECTRONICALLY FILED: CHAD GREGORY WORKMAN

17b. LICENSE NUMBER (Of licensee)
M1677

18. WAS CORONER CONTACTED DUE TO CAUSE OF DEATH?
☐ Yes ☒ No

PLACE OF DEATH

19a. IF DEATH OCCURRED IN A HOSPITAL:
☐ Inpatient ☐ ER/Outpatient ☐ D/OA ☐ Hospice facility ☐ Nursing home/Long term care facility ☐ Decedent's home ☐ Other (Specify)

19b. IF DEATH OCCURRED SOMEWHERE OTHER THAN A HOSPITAL:
**2692 DISTRICT 2 ROAD
BONNERS FERRY, IDAHO, 83805**

20. FACILITY NAME (If not facility, give street and number)
2692 DISTRICT 2 ROAD

21. CITY, TOWN, OR LOCATION OF DEATH, AND ZIP CODE
BONNERS FERRY, IDAHO, 83805

22. COUNTY OF DEATH
BOUNDARY

23. DATE OF DEATH (Mo/Day/Yr) (Spell month)
December 17, 2025

24. TIME OF DEATH (24hr)
01:55

25. DATE PRONOUNCED DEAD (Mo/Day/Yr) (Spell month)
December 17, 2025

26. TIME PRONOUNCED DEAD (24hr)
01:55

CAUSE OF DEATH

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. ALZHEIMER DEMENTIA**
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):

28a. WAS AN AUTOPSY PERFORMED?
☐ Yes ☒ No ☐ Unknown

28b. WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE THE CAUSE OF DEATH?
☐ Yes ☒ No ☐ Unknown

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 ☐ Unknown if pregnant within the past year ☐ Not pregnant, but pregnant within 43 days of death

31. MANNER OF DEATH
☒ Natural ☐ Homicide ☐ Accident ☐ Pending investigation ☐ Suicide ☐ Could not be determined

32. DATE OF INJURY (Mo/Day/Yr) (Spell month)
December 17, 2025

33. TIME OF INJURY (24hr)
01:55

34. PLACE OF INJURY (Decedent's home, farm, street, construction site, nursing home, restaurant, forest, etc.)
2692 DISTRICT 2 ROAD, BONNERS FERRY, IDAHO, 83805

35. INJURY AT WORK?
☐ Yes ☒ No ☐ Unknown

36. LOCATION OF INJURY:
State **IDAHO** City/Town or County **BONNERS FERRY** Zip Code **83805**
Street and Number or Location **2692 DISTRICT 2 ROAD** Apartment Number **83805**

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.
ELECTRONICALLY FILED: WILLIAM P. DIEHL IV

38a. WAS DECEDENT: ☐ Driver/Operator ☐ Passenger ☐ Pedestrian ☐ Other (Specify)

38b. WHAT SAFETY DEVICE(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 - To the best of my knowledge, death occurred at the time, date, and place, and due to the natural cause(s) manner stated.
☐ PHYSICIAN ASSISTANT
☐ ADVANCED PRACTICE REGISTERED NURSE
☐ 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.

39b. LICENSE NUMBER
0-01461

39c. DATE SIGNED
12 / 17 / 2025
MM DD YYYY

Signature and Title of Certifier **ELECTRONICALLY FILED: WILLIAM P. DIEHL IV**

39d. NAME, ADDRESS, AND ZIP CODE OF CERTIFIER (Type or print)
WILLIAM P. DIEHL IV, 6640 KANIKSU STREET, BONNERS FERRY, ID 83805

REGISTRAR

40a. REGISTRAR'S SIGNATURE
James B. Aydelotte

40b. DATE SIGNED
12 / 17 / 2025
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: **DEC 23 2025**

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

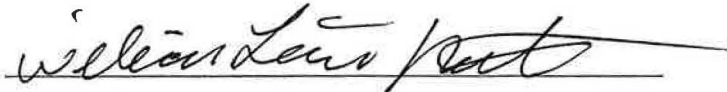
Rev. 08/06/24

JAMES B. AYDELOTTE
STATE REGISTRAR

ACCEPTANCE OF COTRUSTEE

I, William Louis Michalk, hereby accept my appointment as Cotrustee of the Jean Plato Living Trust - Administrative, dated December 17, 2025, and agree to be bound as fiduciary under the terms of the trust.

Dated: 1/20/26

A handwritten signature in cursive script, appearing to read "William Louis Michalk", written over a horizontal line.

William Louis Michalk, Cotrustee

The Third Amendment to the Jean Plato Living Trust

On April 13, 1995, I, Jean A. Plato, also known as Jean A. Michalk; Jean A. Peterson, signed the Jean Plato Living Trust ("my trust"), more formally known as:

Jean A. Plato, Trustee of the Jean Plato Living Trust dated April 13, 1995,
and any amendments.

On December 14, 2011, I exercised my right to restate my trust in its entirety. Article One, Section 1.04(b) of my restated trust permits me to amend it in writing at any time. On June 2, 2020, I exercised my right to amend my trust in part. On this date, I again exercise my right to amend my trust in part. This Amendment represents the Third Amendment to my trust.

Amendment

I exercise the right to amend my trust as follows:

Article Six is hereby deleted in its entirety, and in its place is inserted the following new Article Six:

Article Six Specific Distributions and Disposition of Tangible Personal Property

Section 6.01 Specific Distribution to William Louis Michalk

As soon as practicable after my death, my Trustee shall distribute my home and surrounding property (not held within LMNPJP, LLC) located at 2692 District Two Rd., Bonners Ferry, Idaho 83805 (and comprised of Parcel Numbers RP62N02E192412A, RP62N02E193900A, and RP62N02E194050A), as well as all my trust's interest in Fry Creek Ranch, Inc., an Idaho corporation, to William Louis Michalk.

If William Louis Michalk is deceased, then my Trustee shall distribute the property subject to this Section to Ronald and LeAnn Sukenik, or the survivor of them. If neither Ronald or LeAnn Sukenik are then living, then my Trustee shall distribute the property subject to this Section to Ronald and LeAnn Sukenik's descendants *per stirpes*.

Memorandum of Desire Upon Death

To: My children, Lori, Bill, and Owen, and to my attorney and successor Trustee, Matthew P. Grupp.

This is to express my end-of-life wishes as they relate to certain real property located at my homesite in Bonners Ferry, Idaho.

My personal homesite is owned by the Jean Plato Living Trust dated April 13, 1995, and located in Parcel Numbers RP62N02E192412A, RP62N02E193900A, and RP62N02E194050A in Boundary County, Idaho. Bill has lived with me and taken care of me for many years, and because of all the love and affection, care and support, that he has shown me over the years, it is my desire that upon my death, he inherits the entire parcel upon which my homesite is located. The distribution of this property to Bill is made under my living trust.

In addition to this, there are certain parcels currently owned by LMJPNP, LLC (the "LLC") that rest to the north, west, and south of my homesite within Sections 18, 19, and 30 which I desire to be allocated to the William Louis Michalk Gift Trust dated December 14, 2011 ("Bill's Gift Trust") from the LLC. I make this request as long as the remaining parcels owned by the LLC can be equitably divided between Bill, Lori and Owen such that the Membership interests of Bill's Gift Trust (50%), the Lori Jean Michalk Osborne Gift Trust dated December 14, 2011 ("Lori's Gift Trust") (25%), and the Owen Vale Plato Gift Trust dated December 14, 2011 ("Owen's Gift Trust") (25%), can be respected. In other words, I do not expect the Trustee to allocate more than 50% of the LLC's value to Bill's Gift Trust if by allocating the parcels pursuant to my wishes would create such an over-allocation. The Trustee has discretion to choose parcels from the lists below to satisfy as closely as possible my wishes in this regard.

The LLC parcels I wish to be allocated to Bill's Gift Trust are as follows:

Parcel to the North (Section 18):

- RP62N02E186610A

Parcels to the West and South (Section 19):

- RP62N02E195550A
- RP62N02E195400A
- RP62N02E194961A
- RP62N02E195700A
- RP62N02E195850A
- RP62N02E196150A
- RP62N02E196000A
- RP62N02E196750A

Parcel to the South (Section 30)

- RP62N02E303150A

- o RP62N01E249150A
- o RP62N01E249000A
- o RP62N01E246900A
- o RP62N01E248850A
- o RP62N01E249300A
- o RP62N01E249450A

Parcel in Section 25:

- RP62N01E250020A (Gov Lots 1 and 2)

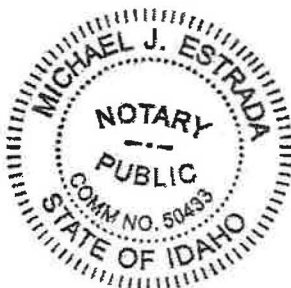
It is my earnest desire that my Trustee, Bill, Lori, and Owen cooperate with each other and allow for the allocation of parcels as indicated above. My Trustee's determination of which parcel is allocated to which Member trust shall be final. If anyone doubts my desires as expressed herein, I invite them to speak with me openly and honestly.

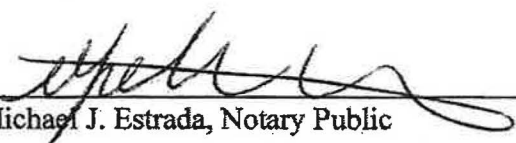

 Jean Plato

STATE OF IDAHO)
) ss.
 COUNTY KOOTENAI)

On this day, July 11, 2023, before me Michael J. Estrada, a notary public, personally appeared Jean A. Plato, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within memorandum, and acknowledged that she executed the same.

[Seal]




 Michael J. Estrada, Notary Public
 My commission expires: July 23, 2025

WHEN RECORDED MAIL TO
Matthew P. Grupp
The Grupp Law Firm LLC
607 E. 6th Avenue, Suite 201
Post Falls, Idaho 83854

303844

STATE OF IDAHO
County of Boundary SS. Sakerill
Filed by: Jean
on 7-20-26 at 9:20
Glenda Poston
County Recorder C. Granger
By Deputy
Fee \$ 15.00 PD
Mail to 2692 District Two Rd.
Bonners Ferry, ID. 83805

SPACE ABOVE FOR RECORDER'S USE

Quitclaim Deed

For no consideration and for the purpose of administering a trust following the Grantor,
Jean Plato's, death,

Matthew P. Grupp, Successor Trustee of the Jean Plato Living Trust, grantor

Does hereby **RELEASE, REMISE AND QUITCLAIM** to

William Louis Michalk, whose address is 2692 District Two Road, Bonners Ferry, Idaho, 83805,
grantee

**all interest in that real property situated in Section 19, Township 62 North, Range 2 East,
Boise Meridian in the County of Boundary, State of Idaho, described as follows:**

The Northwest Quarter less a right-of-way in Section 19, Township 62 North, Range 2 East,
Boise Meridian, Boundary County, Idaho.

Subject to all covenants, conditions, restrictions, exceptions, reservations, easements, and other
limitations of record.

Dated: 7/20/26

Jean Plato Living Trust

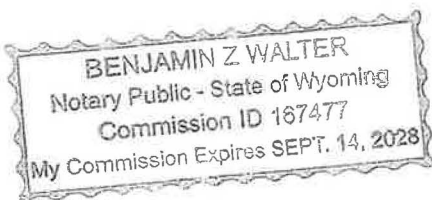

Matthew P. Grupp, Trustee

STATE OF WYOMING)
) ss.
COUNTY TETON)

This instrument was acknowledged before me by Matthew P. Grupp, on 07/20/26.

Witness my hand and official seal.

[Seal]



Benjamin Z. Walter, Notary Public
My commission expires: September 14, 2028