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COUNSEL/PARTIES OF RECORD	
JAN - 9 2015	
CLERK US DISTRICT COURT DISTRICT OF NEVADA	
BY: _____	DEPUTY _____

**ESTATE OF HERMAN L. DREYER**  
**c/o WALTER H. DREYER**  
 161 Fox Hollow Road  
 Woodside, CA 94062

January 5, 2015

U.S. DISTRICT COURT CLERK  
 Attn: C-125 B Notice Clerk  
 Bruce C. Thompson Courthouse  
 400 S. Virginia Street, Room 301  
 Reno, NV 89501

Re: United States v. Walker River Irrigation District

To Whom It May Concern:

I write representing the Estate of Herman L. Dreyer named as a Defendant in the above case. I am the eldest son of Herman L. Dreyer. My father died in 1990. All estate matters have long been completed and timely filed. I render my assistance for purposes of administrative convenience. Herman L. Dreyer owned the Rafter 7 Ranch in Yerington from about 1952 to 1989.

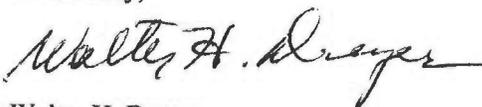
The entire ranch was sold in 1989. All the water rights were sold and transferred with the real property at that time to the new owners. The buyer was the Edwin L. Weigand Trust. Address: 165 West Liberty Street, Suite 200, Reno, NV 89501. Telephone: (775) 333-0310.

In light of the above facts, we respectfully request dismissal of Herman L. Dreyer as a Counter Defendant in the above referenced case.

Please do not hesitate to contact me at the above letterhead address should additional information be required.

Thank you.

Yours truly,



Walter H. Dreyer

## General Information

Application: [5282](#) | Status: CERTIFICATE | Certificate: [1536](#) | [Start new search](#)

### General

<b>Owner(s):</b>	DREYER, HERMAN L.	<b>Basin:</b>	EAST WALKER AREA - 109
<b>Sub Basin:</b>		<b>Basin Status:</b>	
<b>Region:</b>	WALKER RIVER BASIN	<b>County:</b>	MINERAL
<b>Water Resource Specialist:</b>	<a href="#">Reed Cozens</a>		

### Previous Applications (Base Rights)

No previous applications found

<b>Source:</b>	SPRING	<b>Source Description:</b>	TWILIGHT SPRING
<b>Project Name:</b>		<b>Decree Name:</b>	
<b>Use:</b>	STOCKWATERING		
<b>Period Start:</b>	0101	<b>Period End:</b>	1231

### Point of Diversion Information:

<b>Qtr-Qtr:</b>	<b>Qtr:</b>	<b>Section:</b>	<b>Township:</b>	<b>Range:</b>
SW	SE	29	11N	28E

<b>Duty Balance:</b>	25.77876 AFA	<b>Div Balance:</b>	0.035	
<b>Acre-Foot Storage:</b>	0	<b>Well Logs:</b>		Well Log Nos.:
<b>Remarks:</b>				

### Ownership and Title

Application: [5282](#) | Status: CERTIFICATE | Certificate: [1536](#) | [Start new search](#)

#### Current Ownership Information

*(NOTE: Owner names shown here are standardized for retrieval purposes only. Verify legal names before submitting any new documentation.)*

Owner	Type	Div Rate	Duty	Acres	Change By	APN	County	Description
DREYER, HERMAN L.	C	0	0	0				

Confirmed By:

Effective Date:

#### Original Owner(s)

ROSASCHI, AMBRO

#### Remarks

None

Application No. 5282 Certificate Record No. 1536 Book 6 Page 1536

THE STATE OF NEVADA  
CERTIFICATE OF APPROPRIATION OF WATER

WHEREAS, Ambrose Rosaschi has presented to the State Engineer of the State of Nevada Proof of Application of Water to Beneficial Use, from Twilight Springs through pipe to troughs for stockwatering

purposes. The point of diversion of water from the source is as follows: approximately in the SW 1/4 Sec. 29, T. 11 N., R. 28 E., M.B. & M., unsurveyed, or at a point N. 65° 05' E., 12,339 feet from the SE corner Sec. 36, T. 11 N., R. 28 E., M.B. & M. situated in Mineral County, State of Nevada.

Now Know Ye, That the State Engineer, under the provisions of Section 72, Chapter 140, Statutes of 1913 has determined the date, source, purpose and amount of such appropriation; together with the place to which such water is appurtenant, as follows:

Name of appropriator Ambro Rosaschi  
Post-office address Yerington, Lyon County, Nevada  
Amount of appropriation: 0.035 c.f.s. or sufficient to water 5000 head of sheep and 150 head of cattle  
Period of use, from January 1 to December 31 of each year  
Date of priority of appropriation October 11, 1918.

Description of works of diversion, manner and place of use:  
Water is conveyed through 40 feet of 2 inch pipe from the spring to fourteen galvanized iron troughs 20 inches wide and 14 feet long where it is used for the watering of 5000 head of sheep and 150 head of cattle.

The right to water hereby determined is limited to the amount which can be beneficially used; not to exceed the amount above specified, and the use is restricted to the place where acquired and to the purpose for which acquired.

IN TESTIMONY WHEREOF, I, Geo. W. Malone, State Engineer of Nevada, have hereunto set my hand and the seal of my office, this 13th day of March, A. D. 1920  
Geo. W. Malone  
State Engineer.

Recorded Jan 19 1920 Bl. 9 Page 579  
Mineral County Records

Compared C.E.P. 1/20/20

U.S. District Court Clerk  
Bruce R. Thompson Courthouse  
400 S. Virginia Street, Room 301  
Reno, Nevada 89501

Dear Court Clerk:

I am inclosing this Notice of Appearance And Intent to Participate And/Or Notice Of Selecting Method Of Service as instructed. How ever, You should be aware of several things that should preclude me from being involved in this lawsuit.

The Walker river Irrigation District added the homesteaders that lived in the Bybee Lane area to their tax role. Since they could not provide us with any water, several of us sued them to be removed from their jurisdiction. Judge Waters ruled in our favor and we were removed from their roles.

On March 11,1987 I sold the land , including water rights, so have had no interest in that water rights at all since that date.

Sincerely,

Carrol Haskins



**Parcel Detail for Parcel # 014-651-05**

**Location**

Property Location 2 N BYBEE LN PAR 4  
 Town MASON VALLEY   
 Subdivision Lot Block   
 Property Name   
 Remarks

**Ownership**

Assessed Owner Name HASKINS, CARROL  
 RICHARD ETAL TR  
 Mailing Address 406 LEONA   
 YERINGTON, NV 89447-0000   
 Legal Owner Name HASKINS, CARROL  
 RICHARD ETAL TR  
 Vesting Doc#, Date 237647 08/12/99 Book/Page /  
 Map Document #s PM38232

**Description**

Total Acres 3.530 Square Feet 0  
 Ag Acres .000 W/R Acres .000  
Improvements  
 Single-fam Detached 0 Non-dwell Units 0 Bdrm/Bath 0/.00  
 Single-fam Attached 0 MH Hookups 0 Stories .0  
 Multi-fam Units 0 Wells 1  
 Mobile Homes 0 Septic Tanks 0  
 Total Dwelling Units 0 Bldg Sq Ft 0  
 Garage Sq Ft 0 Atch/Detch  
 Basement Sq Ft 0 Finished 0

**Appraisal Classifications**

Current Land Use Code 280   
 Zoning RR2T  
 Re-appraisal Group 3 Re-appraisal Year 2011  
 Orig Constr Year 1999 Weighted Year

**Assessed Valuation**

Assessed Values	2015-16	2014-15	2013-14
Land	6,830	5,990	5,990
Improvements	1,495	1,565	1,427
Personal Property	0	0	0
Ag Land	0	0	0
Exemptions	0	0	0
Net Assessed Value	8,325	7,555	7,417
Increased (New) Values			
Land	0	0	0
Improvements	0	0	0
Personal Property	0	0	0

**Taxable Valuation**

Taxable Values	2015-16	2014-15	2013-14
Land	19,514	17,114	17,114
Improvements	4,271	4,471	4,077
Personal Property	0	0	0
Ag Land	0	0	0
Exemptions	0	0	0
Net Taxable Value	23,786	21,586	21,191
Increased (New) Values			
Land	0	0	0
Improvements	0	0	0
Personal Property	0	0	0

### General Information

Application: [15975](#) | Status: CERTIFICATE | Certificate: [4792](#) | [Start new search](#)

**General**

<b>Owner(s):</b>	HASKINS, CARROL R.	<b>Basin:</b>	MASON VALLEY - 108
<b>Sub Basin:</b>		<b>Basin Status:</b>	DESIGNATED
<b>Region:</b>	WALKER RIVER BASIN	<b>County:</b>	LYON
<b>Water Resource Specialist:</b>	<a href="#">Lynette Johnson</a>		

**Previous Applications (Base Rights)**

No previous applications found

<b>Source:</b>	UNDERGROUND	<b>Source Description:</b>	
<b>Project Name:</b>		<b>Decree Name:</b>	
<b>Use:</b>	DOMESTIC		
<b>Period Start:</b>	0301	<b>Period End:</b>	1031

**Point of Diversion Information:**

<b>Qtr-Qtr:</b>	<b>Qtr:</b>	<b>Section:</b>	<b>Township:</b>	<b>Range:</b>
SW	NW	02	13N	26E

<b>Duty Balance:</b>	1.613 AFA	<b>Div Balance:</b>	0.002	
<b>Acre-Foot Storage:</b>	0	<b>Well Logs:</b>		Well Log Nos.: <a href="#">4086</a>
<b>Remarks:</b>	1440 GPD ON CER			

### Ownership and Title

Application: [15975](#) | Status: CERTIFICATE | Certificate: [4792](#) | [Start new search](#)

#### Current Ownership Information

*(NOTE: Owner names shown here are standardized for retrieval purposes only. Verify legal names before submitting any new documentation.)*

Owner	Type	Div Rate	Duty	Acres	Change By	APN	County	Description
HASKINS, CARROL R.	B	0.002	1.613	0				1440 GPD ON CER

Confirmed By: DZ  
Effective Date: 08-10-2006

#### Original Owner(s)

HASKINS, CARROL R.

#### Remarks

None

Dec 1, 2014

Mr Bruce Thompson  
US DIST COURT Clerk

Sir, this is response to selecting  
a method of service.

In addition I wish to inform you  
that My wife Frances Lucy Hyne  
passed away on August 31, 2013  
(enclosed copy of death certificate)  
and will no longer requiring mailing  
to.

Sincerely,  
Marshall Hyne

<input type="checkbox"/> FILED	<input checked="" type="checkbox"/> RECEIVED
<input type="checkbox"/> ENTERED	<input type="checkbox"/> SERVED ON
COUNSEL/PARTIES OF RECORD	
<div style="border: 1px solid black; padding: 5px; width: fit-content; margin: 0 auto;"> <p>DEC 02 2014</p> </div>	
CLERK US DISTRICT COURT DISTRICT OF NEVADA	
BY: _____	DEPUTY

Marshall Hyne  
10 Spence Lane  
Yerington, NV 89447

STATE OF NEVADA

CERTIFICATION OF VITAL RECORD

Case 3:73-cv-00127-RCJ-WGC Document 2 Filed 03/06/15 Page 10 of 12

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION OF HEALTH  
VITAL STATISTICS

CERTIFICATE OF DEATH

2013014607

STATE FILE NUMBER

TYPE OR PRINT IN PERMANENT BLACK INK	1a. DECEASED-NAME (FIRST,MIDDLE,LAST,SUFFIX) Frances Lucy <b>HYNE</b>		2. DATE OF DEATH (Mo/Day/Year) August 31, 2013		3a. COUNTY OF DEATH Washoe	
	3b. CITY, TOWN, OR LOCATION OF DEATH Reno		3c. HOSPITAL OR OTHER INSTITUTION -Name(If not either, give street and number) Life Care Center of Reno		3e. If Hosp. or Inst. indicate DOA,OP/Emer. Rm. Inpatient(Specify) Nursing Home	
DECEDENT	4. SEX Female		6. Hispanic Origin? Specify No - Non-Hispanic		7a. AGE-Last birthday (Years) 88	
	5. RACE White (Specify)		7b. UNDER 1 YEAR MOS   DAYS		7c. UNDER 1 DAY HOURS   MINS	
IF DEATH OCCURRED IN INSTITUTION SEE HANDBOOK REGARDING COMPLETION OF RESIDENCE ITEMS	9a. STATE OF BIRTH (If not U.S.A., name country) California		9b. CITIZEN OF WHAT COUNTRY United States		10. EDUCATION 14	
	11. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) Married		12. SURVIVING SPOUSE (if wife, give maiden name) Marshall HYNE		8. DATE OF BIRTH (Mo/Day/Yr) August 21, 1925	
PARENTS	13. SOCIAL SECURITY NUMBER 565-30-9282		14a. USUAL OCCUPATION (Give Kind of Work Done During Most of Working Life, Even If Retired) Homemaker		14b. KIND OF BUSINESS OR INDUSTRY Own Home	
	15a. RESIDENCE - STATE Nevada		15b. COUNTY Lyon		15c. CITY, TOWN OR LOCATION Yerington	
DISPOSITION	15d. STREET AND NUMBER 10 Spence Lane		15e. INSIDE CITY LIMITS (Specify Yes or No) No		16. FATHER/PARENT - NAME (First Middle Last Suffix) John IANZITI	
	17. MOTHER/PARENT - NAME (First Middle Last Suffix) Lucy LECAIR		18a. INFORMANT- NAME (Type or Print) Marshall HYNE		18b. MAILING ADDRESS (Street or R.F.D. No, City or Town, State, Zip) 10 Spence Lane Yerington, Nevada 89447	
TRADE CALL	19a. BURIAL, CREMATION, REMOVAL, OTHER (Specify) Burial		19b. CEMETERY OR CREMATORY - NAME Walton's Carson Gardens		19c. LOCATION City or Town State Carson City Nevada 89701	
	20a. FUNERAL DIRECTOR - SIGNATURE (Or Person Acting as Such) <b>RICK NOEL</b> SIGNATURE AUTHENTICATED		20b. FUNERAL DIRECTOR LICENSE 620		20c. NAME AND ADDRESS OF FACILITY Walton's Chapel of the Valley 1281 N Roop Carson City NV 89706	
CERTIFIER	21a. To the best of my knowledge, death occurred at the time, date and place and due to the cause(s) stated. (Signature & Title) <b>GRANT PETER ANDERSON M.D.</b> SIGNATURE AUTHENTICATED		22a. 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) stated. (Signature & Title)		23b. LICENSE NUMBER 3156	
	21b. DATE SIGNED (Mo/Day/Yr) September 06, 2013		21c. HOUR OF DEATH 08:27		22b. DATE SIGNED (Mo/Day/Yr)	
REGISTRAR	21d. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)		22c. HOUR OF DEATH		22d. PRONOUNCED DEAD (Mo/Day/Yr)	
	23a. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, ATTENDING PHYSICIAN, MEDICAL EXAMINER, OR CORONER) (Type or Print) Grant Peter Anderson M.D. 1100 Caughlin Crossing Reno, NV 89519		24a. REGISTRAR (Signature) <b>BRIDGES SANDI</b> SIGNATURE AUTHENTICATED		24b. DATE RECEIVED BY REGISTRAR (Mo/Day/Yr) September 09, 2013	
CAUSE OF DEATH	24c. DEATH DUE TO COMMUNICABLE DISEASE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		25. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c).) PART I (a) <b>Respiratory failure</b>		Interval between onset and death	
	25. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c).) (b) <b>Atherosclerotic vascular disease</b>		DUE TO, OR AS A CONSEQUENCE OF: (c) <b>Atherosclerotic vascular disease</b>		Interval between onset and death	
CONDITIONS IF ANY WHICH GAVE RISE TO IMMEDIATE CAUSE -> STATING THE UNDERLYING CAUSE LAST	25. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c).) (c) <b>Atherosclerotic vascular disease</b>		DUE TO, OR AS A CONSEQUENCE OF: (d) <b>Atherosclerotic vascular disease</b>		Interval between onset and death	
	PART II OTHER SIGNIFICANT CONDITIONS-Conditions contributing to death but not resulting in the underlying cause given in Part 1.		26. AUTOPSY (Specify Yes or No) No		27. WAS CASE REFERRED TO CORONER (Specify Yes or No) Yes	
28a. ACC., SUICIDE, HOM., UNDET. OR PENDING INVEST. (Specify)		28b. DATE OF INJURY (Mo/Day/Yr)		28c. HOUR OF INJURY		
28d. DESCRIBE HOW INJURY OCCURRED		28e. INJURY AT WORK (Specify Yes or No)		28f. PLACE OF INJURY- At home, farm, street, factory, office building, etc. (Specify)		
28g. LOCATION		STREET OR R.F.D. No.		CITY OR TOWN		
STATE						

STATE REGISTRAR

EXHIBIT 4

VRS-Rev-20120523a

499488

CERTIFIED COPY OF VITAL RECORDS

This is a true and exact reproduction of the document officially registered and placed on file in the office of the State Registrar and Vital Records.

DATE ISSUED:

09/09/2013

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

*R. Bridges Sandi*  
STATE REGISTRAR  
SIGNATURE AUTHENTICATED



TO: CLERK, U.S. DISTRICT COURT  
DISTRICT OF NEVADA  
400 SOUTH VIRGINIA ST, ROOM 301  
RENO, NV 89501

FROM: SAMUEL J. SANCHEZ  
8709 STONE FLY CT  
RENO, NV 89523

REF: IN EQUITY NO. C-125-RCJ  
USA ~~VS~~ WALKER RIVER PIUTE TRIBE  
VS. WALKER RIVER IRRIGATION DISTRICT.

THIS LETTER NOTIFIES THAT I NO  
LONGER OWN THE LOT A ISSUE IN  
LYON COUNTY. ALSO MY CO-DEFENDENT  
WIFE DONALD S. SANCHEZ DECEASED ON  
11-16-2013.

PLEASE REMOVE ME FROM THIS SUIT  
THANK YOU,

SIGNED: Samuel J Sanchez

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System. Registration shall be in the form prescribed by the Clerk of the Court and by these Electronic Filing Procedures." U.S. Dist. Ct., D. Nev., Electronic Filing Procedures (rev. Aug. 24, 2006) at I.C.

4. If I am not represented by an attorney, I elect to receive service of documents by one of the two court approved methods (select only one method of service):

a. Electronic Service \_\_\_\_\_ (your initials) to the following e-mail address of notice that a motion, pleading, or document has been filed in this case and that it may be viewed at the Court's website ([www.nvd.uscourts.gov](http://www.nvd.uscourts.gov)):

\_\_\_\_\_  
(please provide a current e-mail address).

b. Postcard Service \_\_\_\_\_ (your initials) to the following physical mailing address of notice that a motion, pleading, or document has been filed in this case and that it may be viewed at the Court's website ([www.nvd.uscourts.gov](http://www.nvd.uscourts.gov)):

\_\_\_\_\_  
(please provide a current mailing address).

**PLEASE NOTE:** To keep costs down for all parties to this case, the District Court **strongly** encourages unrepresented parties to accept Electronic Service.

11/17/14  
I NO LONGER OWN  
PROPERTY OR WATER  
RIGHTS IN THIS  
CASE. *T. Walsh*

*Tom J. Walsh*  
(Signature)

TOM J. WALSH M.D.  
(Printed or typed Name)

\_\_\_\_\_  
(Entity, if any, on whose behalf you are appearing)  
32 MACKENZIE LANE  
VERMONTON, NJ 09947  
(Address)  
775 463-4670  
(Telephone number)