

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
NOTICE OF CHANGE IN WATER RIGHT OWNERSHIP

Please print or type. Attach pages with additional information. Instructions are included at the end of this form.
 Incomplete forms will be returned.

1. Please list the water right number(s) and/or adjudication claim number(s) (if any) for each water right to be changed. List just the adjudication claim number if there is no corresponding water right record on file with the department. Indicate, by checking in the space provided (under the "split" heading), if the change in ownership is limited to a portion of a water right in which case division of the existing water right or adjudication claim record will be required.

Water	Adjudication	Water	Adjudication
<u>Right No(s).</u>	<u>Claim No(s).</u>	<u>Right No(s).</u>	<u>Claim No(s).</u>
	<u>Split</u>		<u>Split</u>
	<u>82-10024</u>		

2. The following **REQUIRED** information must be submitted with this form:

A. The appropriate **FILING FEE**. See instructions for fee amounts.

B. A copy of the most recent **DEED, TITLE POLICY, CONTRACT OF SALE** or other legal document indicating your ownership of the property and water right(s) or claim(s) in question, **WITH ATTACHED LEGAL DESCRIPTION**.

C. Either of the following (if necessary to clarify division of water rights or other complex property descriptions): **PLAT OF PROPERTY** or **SURVEY MAP** clearly showing the location of the point(s) of diversion and place of use of your water right(s) and/or adjudication claim(s) (these are usually attached to your deed or on file with the county).

OR

If your water right(s) and/or adjudication claim(s) is for ten or more acres of irrigation, you must submit a USDA Farm Service Agency **AERIAL PHOTO** with the irrigated acres outlined and point(s) of diversion clearly marked. The **AERIAL PHOTO** should be submitted in place of the **PLAT OF PROPERTY** or **SURVEY MAP**.

3. Name and Address of Former Owner/Claimant(s) Douglas R. Clark & Iva M. Clark
Rt1 Box 4A Melba, ID 83641; 2039 S. Birch St. Santa Ana, CA 92702
4. New Owner/Claimant(s) Carol Lee Clark
 Name Connector (Check one): [] and, [] or, [] and/or
- New Mailing Address P.O. Box 22844
- City, State and ZIP Code Seattle, WA 98122
- New Telephone Number (206) 706 0028
5. Date you acquired the property 11-11-99

6. **If the change in ownership affects the entire water right for each water right or adjudication claim number listed in item 1, THEN SKIP THIS ITEM AND GO TO ITEM 7.** If the change in ownership divides the water right(s) among multiple owners, you must describe, in detail, your portion of each water right after the change. Fill in the appropriate spaces in the box(es) below to describe your water right(s) after the change (one water right per box, you may copy this page as necessary). If your quantity of water is greater than a proportionate split, you must attach documentation to show justification for a larger amount. If you are not sure how to identify your portion of the original water right or adjudication claim records, please contact the nearest IDWR office for assistance.

DESCRIPTION OF YOUR PORTION OF WATER RIGHT (If the right(s) will not be split, skip this area and proceed to item 7)		
Water Right and/or Adjudication Claim Number _____		
Water Use	Diversion Rate or Volume (cubic feet per second or acre-feet per annum)	Description (acres, number and type of stock, homes, etc)
Irrigation	_____	_____
Stock	_____	_____
Domestic	_____	_____
Other _____	_____	_____
Total	_____	_____

DESCRIPTION OF YOUR PORTION OF WATER RIGHT (If the right(s) will not be split, skip this area and proceed to item 7)		
Water Right and/or Adjudication Claim Number _____		
Water Use	Diversion Rate or Volume (cubic feet per second or acre-feet per annum)	Description (acres, number and type of stock, homes, etc)
Irrigation	_____	_____
Stock	_____	_____
Domestic	_____	_____
Other _____	_____	_____
Total	_____	_____

7. Signature of New Owner(s) or Claimant(s)
(include title if applicable)

Carol Sue Clark

For Snake River Basin Adjudication Claims: Please attach a Notice of Appearance completed by your attorney, if you wish IDWR to correspond with him/her for all matters related to your claims.

For Office Use Only

Received by _____
 Received by _____
 Processed by 24 AJ

Date _____
 Date _____
 Date 5-17-05

Fee _____
 Receipt No. _____
 WR _____ Date _____

370511

QUITCLAIM DEED

COMPUTER
INDEXED
TRACTED
FILMED
ASSESSOR

For Value Received, in consideration of love and affection,
as a gift,

IVA M. CLARK

do hereby convey, release, remise and forever quit claim

unto DOUGLAS R. CLARK and CAROL L. CLARK

the following described premises, to-wit:

LOT 5, SECTION 30, TWP. 29 N., R. 8, E. B. M.

COUNTY OF IDAHO, STATE OF IDAHO

Market Value assessed by Tax Assessor 1991 is \$8,319.00.

together with their appurtenances.

Dated: 5 November 1992

Iva M Clark
IVA M. CLARK

~~California, Los Angeles County~~
STATE OF ~~IDAHO~~ COUNTY ~~XXXX~~

On this 5th day of Nov., 1992,
before me, a notary public in and for said State, personally
appeared, *Iva M. Clark*



known to me to be the person who se name is
subscribed to the within instrument, and acknowledged to
me that she executed the same.

Marianna Hofer
Notary Public

Residing at
Comm. Expires

STATE OF IDAHO, COUNTY OF *Idaho*

I hereby certify that this instrument was filed for record at
the request of *Douglas Clark*

at minutes past 10 o'clock A. M.,
this 7 day of September
1993, in my office, and duly recorded in Book
of Deeds at page

ROSE E. GEHRING

Ex-Officio Recorder

By *Sandy Harris* Deputy.

Fees \$ 3.00

Mail to: *6215 Baseline*

STATE OF WASHINGTON DEPARTMENT OF HEALTH

CERTIFIED COPY OF DEATH CERTIFICATE

TYPE OR PRINT IN PERMANENT BLACK INK

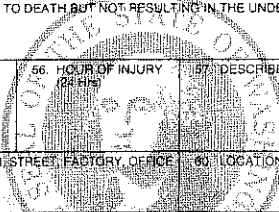
11457
LOCAL FILE NUMBER



146

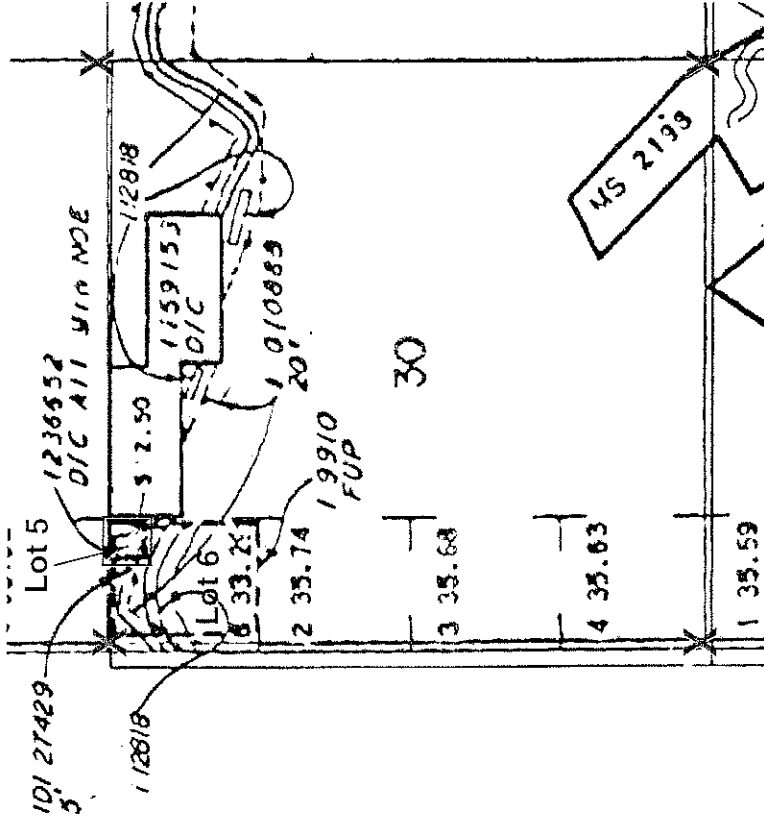
STATE FILE NUMBER

1. NAME First: Douglas Middle: Ryan Last: Clark				2. SEX (M / F) Male		3. DEATH DATE (Mo, Day, Yr) 11/11/1999	
4. AGE LAST BIRTHDAY (Yrs) 56		5. UNDER 1 YEAR MOS: DAYS: HOURS: MINS:		6. UNDER 1 DAY MOS: DAYS: HOURS: MINS:		7. BIRTHDATE (Mo, Day, Yr) 6/1/1943	
8. BIRTHPLACE (City, State or Foreign Country) Redondo Beach, CA				9. WAS DECEDENT EVER IN U.S. ARMED FORCES? (Yes / No) Yes		10. COUNTY OF DEATH King	
11. CITY, TOWN OR LOCATION OF DEATH Seattle				12. PLACE OF DEATH — ☒ BOX FOR PLACE THEN GIVE ADDRESS OR INSTITUTION NAME 1. ☐ HOME 2. ☐ IN TRANSPORT 3. ☐ EMERG. RM/OUT PTN 4. ☐ HOSP. 5. ☐ NUR HOME 6. ☐ OTHER PLACE 2830 NW 56th St. Apt 201			
13. SMOKING IN LAST 15 YEARS? (Yes / No) No		14. MARITAL STATUS — Married, Never married, Widowed, Divorced (Specify) Married		15. SURVIVING SPOUSE (If wife, give maiden name) Carol Driggers		16. SOCIAL SECURITY NO. 557-64-5653	
17. DECEDENT'S EDUCATION (Specify only highest grade completed) Elementary/Secondary (0-12): College (1-4 or 5+): 4				18. USUAL OCCUPATION (Give kind of work done during most of working life. DO NOT USE RETIRED) Rancher			
19. KIND OF BUSINESS OR INDUSTRY Agricultural				20. Was Decedent of Hispanic origin or descent? (Ancestry) (Specify Yes or No. If Yes, specify Cuban, Mexican, Puerto Rican, etc.) No			
21. RACE (Specify) White				22. RESIDENCE — NUMBER AND STREET 2830 NW 56th St. Apt 201			
23. CITY/TOWN, OR LOCATION Seattle				24. INSIDE CITY LIMITS? (Yes / No) Yes		25. COUNTY King	
26. STATE WA				27. ZIP CODE 98107			
28. FATHER'S NAME — FIRST, MIDDLE, LAST Ryan Clark				29. MOTHER'S NAME — FIRST, MIDDLE, MAIDEN SURNAME Iva Mae Parks			
30. INFORMANT — NAME Carol Clark				31. MAILING ADDRESS STREET OR RFD NO. CITY OR TOWN STATE ZIP 2830 NW 56th St. Apt 201 Seattle WA 98107			
32. BURIAL, CREMATION REMOVAL, OTHER (Specify) Cremation		33. DATE (Mo, Day, Yr) 11/17/1999		34. CEMETERY/CREMATORY — NAME Washelli Crematory		35. LOCATION — CITY/TOWN, STATE Seattle, WA	
36. FUNERAL DIRECTOR SIGNATURE <i>[Signature]</i>				37. NAME OF FACILITY Evergreen Washelli Funeral Home			
38. ADDRESS OF FACILITY Seattle, WA							
TO BE COMPLETED ONLY BY CERTIFYING PHYSICIAN				TO BE COMPLETED ONLY BY MEDICAL EXAMINER OR CORONER			
39. TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE TIME, DATE AND PLACE AND WAS DUE TO THE CAUSE(S) STATED. SIGNATURE AND TITLE <i>[Signature]</i> M.D.				43. ON THE BASIS OF EXAMINATION AND/OR INVESTIGATION, IN MY OPINION DEATH OCCURRED AT THE TIME, DATE AND PLACE AND WAS DUE TO THE CAUSE(S) STATED. SIGNATURE AND TITLE X			
40. DATE SIGNED (Mo., Day, Yr) 11/12/99		41. HOUR OF DEATH (24 Hrs.) 0800		44. DATE SIGNED (Mo., Day, Yr)		45. HOUR OF DEATH (24 Hrs.)	
42. NAME AND TITLE OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)				46. PRONOUNCED DEAD (Mo., Day, Yr)		47. HOUR PRONOUNCED DEAD (24 Hrs.)	
48. NAME AND ADDRESS OF CERTIFIER — PHYSICIAN, MEDICAL EXAMINER OR CORONER (Type or Print) Mitchell A. Karton, M.D., 1221 Madison #920 Seattle, WA 98104						49. ME/CORONER FILE NUMBER NJA 4198-99	
50. ENTER THE DISEASES, INJURIES, OR COMPLICATIONS WHICH CAUSED THE DEATH:							
IMMEDIATE CAUSE (Final disease or condition resulting in death).		A. Brain Tumor (Astrocytoma)				INTERVAL BETWEEN ONSET AND DEATH 6 years	
DO NOT ENTER THE MODE OF DYING, SUCH AS CARDIAC OR RESPIRATORY ARREST, SHOCK, OR HEART FAILURE. LIST ONLY ONE CAUSE ON EACH LINE. Sequentially list conditions, if any, leading to immediate cause. Enter UNDERLYING CAUSE (Disease or injury which initiated events resulting in death) LAST.		B. DUE TO, OR AS A CONSEQUENCE OF:				INTERVAL BETWEEN ONSET AND DEATH	
		C. DUE TO, OR AS A CONSEQUENCE OF:				INTERVAL BETWEEN ONSET AND DEATH	
		D. DUE TO, OR AS A CONSEQUENCE OF:				INTERVAL BETWEEN ONSET AND DEATH	
51. OTHER SIGNIFICANT CONDITIONS — CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVE ABOVE: Pulmonary Emboli						52. AUTOPSY? (Yes / No) No	
53. WAS CASE REFERRED TO MEDICAL EXAMINER OR CORONER? (Yes / No) Yes							
54. ACC, SUICIDE, HOM., UNDET., OR PENDING INVEST. (Specify)		55. INJURY DATE (Mo, Day, Yr)		56. HOUR OF INJURY (24 Hrs.)		57. DESCRIBE HOW INJURY OCCURRED:	
58. INJURY AT WORK? (Yes / No)		59. PLACE OF INJURY — AT HOME, FARM, STREET, FACTORY, OFFICE, BLDG, ETC. (Specify)		60. LOCATION — STREET OR RFD NO., CITY/TOWN, STATE			
61. RECORD-AMENDMENT (Registrar use only) ITEM DOCUMENTARY EVIDENCE REVIEWED BY DATE		62. REGISTRAR SIGNATURE <i>[Signature]</i>		63. DATE RECEIVED (Mo., Day, Yr) NOV 18, 1999			



82-10024

T29N R08E S30 NWNW



-This domestic right needs location clarification.

-The Point of Diversion is located at:

T29N R08E S30 Lot 5 (NENWNW)

-The Place of Use is located at:

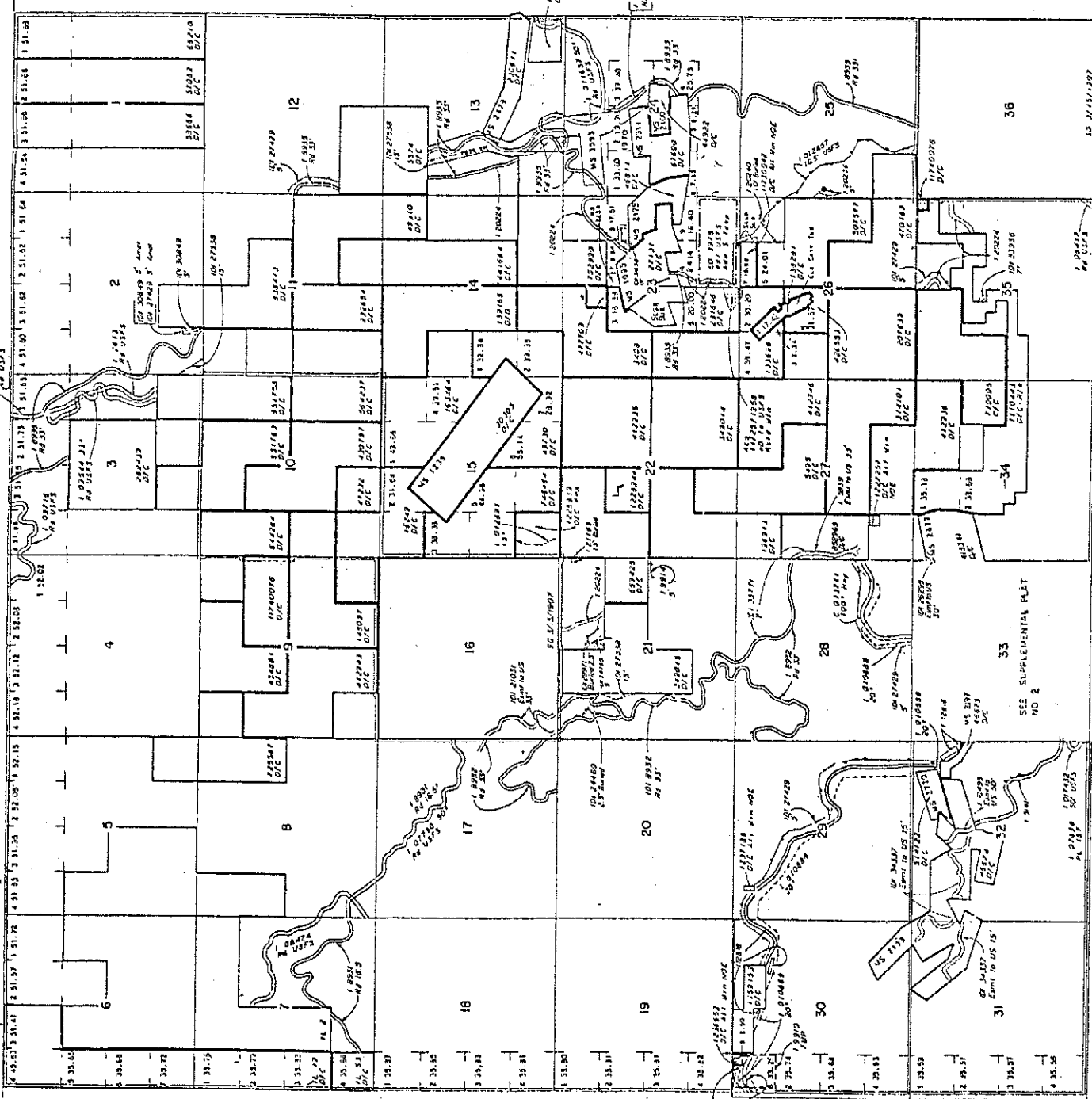
T29N R08E S30 Lot 5 (NWNW)

TOWNSHIP 29 NORTH RANGE 8 EAST OF THE BOISE MERIDIAN, IDAHO

IDAHO COUNTY 049

CORNER D'ALENE DISTRICT
COTTONWOOD

30 N-T E 30 N-2 E



STATUS OF PUBLIC DOMAIN
LAND AND MINERAL TITLES
AND ACQUIRED LANDS

MT PLAT

INDEX TO SEGREGATED TRACTS			
REMARKS			
TRACT NO.	T	R	SUBDIVISION
1	29	8	1
2	29	8	2
3	29	8	3
4	29	8	4
5	29	8	5
6	29	8	6
7	29	8	7
8	29	8	8
9	29	8	9
10	29	8	10
11	29	8	11
12	29	8	12
13	29	8	13
14	29	8	14
15	29	8	15
16	29	8	16
17	29	8	17
18	29	8	18
19	29	8	19
20	29	8	20
21	29	8	21
22	29	8	22
23	29	8	23
24	29	8	24
25	29	8	25
26	29	8	26
27	29	8	27
28	29	8	28
29	29	8	29
30	29	8	30
31	29	8	31
32	29	8	32
33	29	8	33
34	29	8	34
35	29	8	35
36	29	8	36

1. 01933 Pat. Pl. 152 Part of Sec. 12, T. 29 N., R. 8 E., S. 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100, 101, 102, 103, 104, 105, 106, 107, 108, 109, 110, 111, 112, 113, 114, 115, 116, 117, 118, 119, 120, 121, 122, 123, 124, 125, 126, 127, 128, 129, 130, 131, 132, 133, 134, 135, 136, 137, 138, 139, 140, 141, 142, 143, 144, 145, 146, 147, 148, 149, 150, 151, 152, 153, 154, 155, 156, 157, 158, 159, 160, 161, 162, 163, 164, 165, 166, 167, 168, 169, 170, 171, 172, 173, 174, 175, 176, 177, 178, 179, 180, 181, 182, 183, 184, 185, 186, 187, 188, 189, 190, 191, 192, 193, 194, 195, 196, 197, 198, 199, 200, 201, 202, 203, 204, 205, 206, 207, 208, 209, 210, 211, 212, 213, 214, 215, 216, 217, 218, 219, 220, 221, 222, 223, 224, 225, 226, 227, 228, 229, 230, 231, 232, 233, 234, 235, 236, 237, 238, 239, 240, 241, 242, 243, 244, 245, 246, 247, 248, 249, 250, 251, 252, 253, 254, 255, 256, 257, 258, 259, 260, 261, 262, 263, 264, 265, 266, 267, 268, 269, 270, 271, 272, 273, 274, 275, 276, 277, 278, 279, 280, 281, 282, 283, 284, 285, 286, 287, 288, 289, 290, 291, 292, 293, 294, 295, 296, 297, 298, 299, 300, 301, 302, 303, 304, 305, 306, 307, 308, 309, 310, 311, 312, 313, 314, 315, 316, 317, 318, 319, 320, 321, 322, 323, 324, 325, 326, 327, 328, 329, 330, 331, 332, 333, 334, 335, 336, 337, 338, 339, 340, 341, 342, 343, 344, 345, 346, 347, 348, 349, 350, 351, 352, 353, 354, 355, 356, 357, 358, 359, 360, 361, 362, 363, 364, 365, 366, 367, 368, 369, 370, 371, 372, 373, 374, 375, 376, 377, 378, 379, 380, 381, 382, 383, 384, 385, 386, 387, 388, 389, 390, 391, 392, 393, 394, 395, 396, 397, 398, 399, 400, 401, 402, 403, 404, 405, 406, 407, 408, 409, 410, 411, 412, 413, 414, 415, 416, 417, 418, 419, 420, 421, 422, 423, 424, 425, 426, 427, 428, 429, 430, 431, 432, 433, 434, 435, 436, 437, 438, 439, 440, 441, 442, 443, 444, 445, 446, 447, 448, 449, 450, 451, 452, 453, 454, 455, 456, 457, 458, 459, 460, 461, 462, 463, 464, 465, 466, 467, 468, 469, 470, 471, 472, 473, 474, 475, 476, 477, 478, 479, 480, 481, 482, 483, 484, 485, 486, 487, 488, 489, 490, 491, 492, 493, 494, 495, 496, 497, 498, 499, 500, 501, 502, 503, 504, 505, 506, 507, 508, 509, 510, 511, 512, 513, 514, 515, 516, 517, 518, 519, 520, 521, 522, 523, 524, 525, 526, 527, 528, 529, 530, 531, 532, 533, 534, 535, 536, 537, 538, 539, 540, 541, 542, 543, 544, 545, 546, 547, 548, 549, 550, 551, 552, 553, 554, 555, 556, 557, 558, 559, 560, 561, 562, 563, 564, 565, 566, 567, 568, 569, 570, 571, 572, 573, 574, 575, 576, 577, 578, 579, 580, 581, 582, 583, 584, 585, 586, 587, 588, 589, 590, 591, 592, 593, 594, 595, 596, 597, 598, 599, 600, 601, 602, 603, 604, 605, 606, 607, 608, 609, 610, 611, 612, 613, 614, 615, 616, 617, 618, 619, 620, 621, 622, 623, 624, 625, 626, 627, 628, 629, 630, 631, 632, 633, 634, 635, 636, 637, 638, 639, 640, 641, 642, 643, 644, 645, 646, 647, 648, 649, 650, 651, 652, 653, 654, 655, 656, 657, 658, 659, 660, 661, 662, 663, 664, 665, 666, 667, 668, 669, 670, 671, 672, 673, 674, 675, 676, 677, 678, 679, 680, 681, 682, 683, 684, 685, 686, 687, 688, 689, 690, 691, 692, 693, 694, 695, 696, 697, 698, 699, 700, 701, 702, 703, 704, 705, 706, 707, 708, 709, 710, 711, 712, 713, 714, 715, 716, 717, 718, 719, 720, 721, 722, 723, 724, 725, 726, 727, 728, 729, 730, 731, 732, 733, 734, 735, 736, 737, 738, 739, 740, 741, 742, 743, 744, 745, 746, 747, 748, 749, 750, 751, 752, 753, 754, 755, 756, 757, 758, 759, 760, 761, 762, 763, 764, 765, 766, 767, 768, 769, 770, 771, 772, 773, 774, 775, 776, 777, 778, 779, 780, 781, 782, 783, 784, 785, 786, 787, 788, 789, 790, 791, 792, 793, 794, 795, 796, 797, 798, 799, 800, 801, 802, 803, 804, 805, 806, 807, 808, 809, 810, 811, 812, 813, 814, 815, 816, 817, 818, 819, 820, 821, 822, 823, 824, 825, 826, 827, 828, 829, 830, 831, 832, 833, 834, 835, 836, 837, 838, 839, 840, 841, 842, 843, 844, 845, 846, 847, 848, 849, 850, 851, 852, 853, 854, 855, 856, 857, 858, 859, 860, 861, 862, 863, 864, 865, 866, 867, 868, 869, 870, 871, 872, 873, 874, 875, 876, 877, 878, 879, 880, 881, 882, 883, 884, 885, 886, 887, 888, 889, 890, 891, 892, 893, 894, 895, 896, 897, 898, 899, 900, 901, 902, 903, 904, 905, 906, 907, 908, 909, 910, 911, 912, 913, 914, 915, 916, 917, 918, 919, 920, 921, 922, 923, 924, 925, 926, 927, 928, 929, 930, 931, 932, 933, 934, 935, 936, 937, 938, 939, 940, 941, 942, 943, 944, 945, 946, 947, 948, 949, 950, 951, 952, 953, 954, 955, 956, 957, 958, 959, 960, 961, 962, 963, 964, 965, 966, 967, 968, 969, 970, 971, 972, 973, 974, 975, 976, 977, 978, 979, 980, 981, 982, 983, 984, 985, 986, 987, 988, 989, 990, 991, 992, 993, 994, 995, 996, 997, 998, 999, 1000.

FOR ORDERS EFFECTING DISPOSAL OR USE OF
UNIDENTIFIED LANDS REFER TO INDEX OF
MISCELLANEOUS DOCUMENTS

CURRENT TO	COMMENT TO
AUG. 13 1904.	
USE PLATS.	