



State of Idaho

DEPARTMENT OF WATER RESOURCES

322 East Front Street, P.O. Box 83720, Boise, ID 83720-0098

Phone: (208) 287-4800 Fax: (208) 287-6700 Web Site: www.idwr.idaho.gov.DIRK KEMPTHORNE
GovernorKARL J. DREIER
Director

FAX Transmittal Cover Sheet

Number of pages including this one: 5Date: 12.12.05To: James BowmanFax No.: 585-265-2306From: Lori PawFax No.: 208 287 6701Phone No.: 287-4909Subject: ownership change per Becky Harveys request*damni.smith@idwr.idaho.gov*

Form 42 24542-1 (05/05) July 2000

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 Right No(s)	Adjudication Claim No(s)	Split	Water Right No(s)	Adjudication Claim No(s)	Split
84-10794	39365				

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 A 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) Prarie Land + Timber Co. + Virginia Ketchum
Grangeville ID PO Box 1621
Grangeville, ID 83544
4. New Owner/Claimant(s) James and Barbara Bowman
 Name Connection (Check one): ☐ and, ☐ or, ☐ and/or
- New Mailing Address 1364 Brick Church Rd
 City, State and ZIP Code Ontario, N.Y. 14519
 New Telephone Number (1315) 524 5404
5. Date you acquired the property 5/27/05

Form 42-248A2-1485(0) July, 2000

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, horses, 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, horses, etc)
Irrigation	_____	_____
Stock	_____	_____
Domestic	_____	_____
Other	_____	_____
Total	_____	_____

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

James D. Brannen + Barbara Y. Bowman

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 _____ Date _____ Fee _____
 Recipient by _____ Date _____ Receipt No. _____
 Processed by _____ AJ Date _____ WR _____ Date _____

Apr. 20, 2005 7:19AM

15. Basis of Claim (check one) Ban. ☒ Use ☒ Permit ☐
Decree _____
If applicable provide IDWR Water Right Number _____
Court _____ Case Number _____ Decree Date _____
Plaintiff vs. Defendant _____

16. Signature (s)
(a.) By signing below, I/We acknowledge that I/We have received, read, and understood the form entitled
"How you will receive notice in the Snake River Basin Adjudication." (b.) I/We do _____ do not _____
wish to receive and pay a small annual fee for monthly copies of the docket sheet.
Number of attachments _____
For Individuals: I do solemnly swear or affirm that the statements contained in the foregoing document are true
and correct.
Signature of Claimant (s) David S. Olson Date 10/10/88
_____ Date _____

For Organizations: I do solemnly swear or affirm that I am _____ Title _____
of _____ Organization _____, that I have signed the foregoing
document in the space below as _____ Title _____ Organization _____
and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent David S. Olson
Title and Organization Director Date 10/10/88

State of Idaho/or _____ } SS.
County of Clemato
Subscribed and sworn (or affirmed) before me this 10th day of October 19 88
SEAL
Notary Public: Heidi Lewis
Residing at Orville
My Commission Expires 1/30/91
Please Print Name _____

17. Notice of Appearance:
Notice is hereby given that I, _____ will be acting as attorney at law on behalf
of the claimant signing above, and that all notices required by law to be mailed by the director to the claimant signing above
should be mailed to me at the address listed below.

Signature _____
Address _____
Date _____
Last Name _____ Ident. Number ABY-10794
Copy: Mike Olson, Idaho-Chief

b. What is claimed for the following cases:

(both rates are inclusive)

(cfs)

{acrn: 1621}

2 For Retention Storage purposes from 1-1 to 12-31 amount 240 or 240

4 For ^{SPN} Retention Storage purposes from 6-1 to 9-30 amount 70 or 70

For STOCKHOLDERS purposes from 1-1 to 12-31 amount or 220

80	For ~~SIDNEY~~ ^{STANLEY} ~~ESTATE~~ purposes from	1-1	to	12-31	amount	0.04	or	2.20
79	~~REC.RENTAL STORAGE~~	1-1		12-31				
78	Tida quantity claimed (a)	0.04	(c's) and/or (b)			2.20		(acre feet)

3. Total consumptive use claimed is 72 acre feet per annum.

3. Non-irrigation uses; describe fully (eg. Domestic: Give number of households served; Stockwater: Type and number of livestock Etc.) Stock - 40 cattle

16. Description of place of use:

- a. If water is for irrigation, indicate acreage in each subdistribution in the tabulation below.
- b. If water is used for other purposes, place a symbol of use (for example, D for Domestic) in the corresponding place of use below. See instructions for standard symbols.

[illegible]

Total number of acres irrigated

20

11. In which country (ies) are lands listed above as place of use located? Col. F. ALBUQUERQUE

12. Do you own the property listed above as place of use? Yes X No
If your answer is No, describe in Remarks below the authority you have to claim this water right.

13. Describe any other water rights used at the same place and for the same purposes as described above.

14 Remarks: *11/12/2006 INTEREST IN AUCTIONS BY 15 PARTNER*

Last Name _____ Ident No. 4840794

Ident No. 484-D-794

1. 1940 1941 1942 1943 1944 1945 1946 1947 1948 1949 1950 1951 1952 1953 1954 1955 1956 1957 1958 1959 1960 1961 1962 1963 1964 1965 1966 1967 1968 1969 1970 1971 1972 1973 1974 1975 1976 1977 1978 1979 1980 1981 1982 1983 1984 1985 1986 1987 1988 1989 1990 1991 1992 1993 1994 1995 1996 1997 1998 1999 2000 2001 2002 2003 2004 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015 2016 2017 2018 2019 2020 2021 2022 2023 2024 2025 2026 2027 2028 2029 2030 2031 2032 2033 2034 2035 2036 2037 2038 2039 2040 2041 2042 2043 2044 2045 2046 2047 2048 2049 2050 2051 2052 2053 2054 2055 2056 2057 2058 2059 2060 2061 2062 2063 2064 2065 2066 2067 2068 2069 2070 2071 2072 2073 2074 2075 2076 2077 2078 2079 2080 2081 2082 2083 2084 2085 2086 2087 2088 2089 2090 2091 2092 2093 2094 2095 2096 2097 2098 2099 2100 2101 2102 2103 2104 2105 2106 2107 2108 2109 2110 2111 2112 2113 2114 2115 2116 2117 2118 2119 2120 2121 2122 2123 2124 2125 2126 2127 2128 2129 2130 2131 2132 2133 2134 2135 2136 2137 2138 2139 2140 2141 2142 2143 2144 2145 2146 2147 2148 2149 2150 2151 2152 2153 2154 2155 2156 2157 2158 2159 2160 2161 2162 2163 2164 2165 2166 2167 2168 2169 2170 2171 2172 2173 2174 2175 2176 2177 2178 2179 2180 2181 2182 2183 2184 2185 2186 2187 2188 2189 2190 2191 2192 2193 2194 2195 2196 2197 2198 2199 2200 2201 2202 2203 2204 2205 2206 2207 2208 2209 2210 2211 2212 2213 2214 2215 2216 2217 2218 2219 2220 2221 2222 2223 2224 2225 2226 2227 2228 2229 2230 2231 2232 2233 2234 2235 2236 2237 2238 2239 2240 2241 2242 2243 2244 2245 2246 2247 2248 2249 2250 2251 2252 2253 2254 2255 2256 2257 2258 2259 2260 2261 2262 2263 2264 2265 2266 2267 2268 2269 2270 2271 2272 2273 2274 2275 2276 2277 2278 2279 2280 2281 2282 2283 2284 2285 2286 2287 2288 2289 2290 2291 2292 2293 2294 2295 2296 2297 2298 2299 2300 2301 2302 2303 2304 2305 2306 2307 2308 2309 2310 2311 2312 2313 2314 2315 2316 2317 2318 2319 2320 2321 2322 2323 2324 2325 2326 2327 2328 2329 2330 2331 2332 2333 2334 2335 2336 2337 2338 2339 2340 2341 2342 2343 2344 2345 2346 2347 2348

Apr. 20, 2005 7:18AM

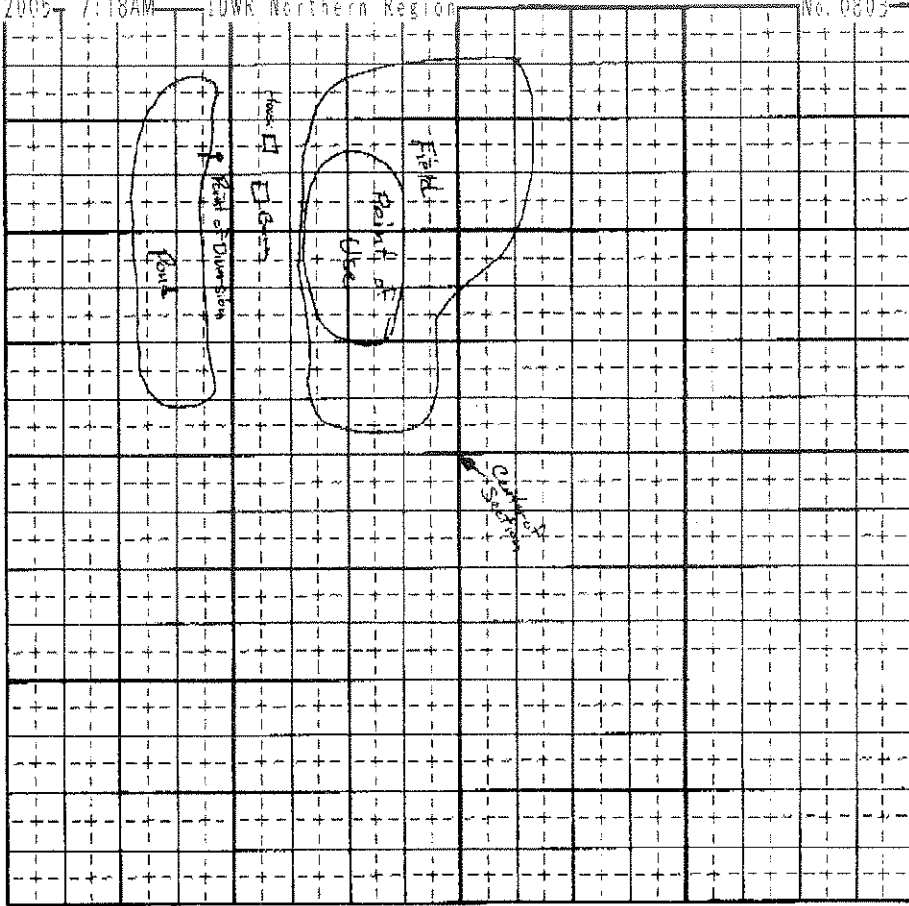
IDWR Northern Region

No. 0803

P. 3

Map of Project show clearly the position of diversion, place of use, section number, township, and range number.
Scale 1 inch equals 1 mile

Section 23 Township 36 North Range 1 East



Last Name _____ Ident No. 884-10794 _____

Copy: _____

CLEARWATER COUNTY ASSESSOR
P.O. BOX 626
OROFINO, IDAHO 83544

BOWMAN, JAMES L & BARBARA G
348 BERG RD
ONTARIO NY 14519

SEC 23 36N 2E
S 1/2 SWNW, W 1/2 NESW, NWSW
LESS TAX #1396

EACH YEAR THIS DEPARTMENT GATHERS AND CONFIRMS DATA TO BE USED IN VARIOUS STUDIES TO ENSURE EQUALITY IN COUNTYWIDE PROPERTY TAXATION. EQUALITY LEVELS CAN BE ACHIEVED WITH YOUR COOPERATION AND ASSISTANCE.

THE PRIMARY SOURCE OF SALES INFORMATION IS THE VOLUNTARY RECORDS SUPPLIED BY YOU, THE BUYER OR SELLER. THE MORE RESPONSE WE HAVE FROM YOU, THE BETTER WE CAN ACHIEVE THESE EQUALITY LEVELS FOR COUNTY PROPERTY VALUES.

YOUR COOPERATION IN FURNISHING THE NEEDED INFORMATION ON THE ENCLOSED QUESTIONNAIRE WILL BE APPRECIATED.

A STAMPED, SELF-ADDRESSED ENVELOPE IS ENCLOSED FOR YOUR CONVENIENCE.

PLEASE NOTE THAT YOU MAY ALSO MAKE APPLICATION FOR THE HOMEOWNER EXEMPTION (REDUCES TAXABLE VALUE ON THE HOME BY 1/2 OR 50,000 WHICHEVER IS LESS) BY COMING IN TO THE ASSESSOR'S OFFICE FOR AN APPLICATION. THIS MUST BE SIGNED ON OR BEFORE APRIL 15.

IF YOU PURCHASED A MOBILE HOME YOU NEED TO BRING THE TITLE INTO THE DMV OFFICE TO BE CHANGED INTO YOUR NAME, SO WE MAY UPDATE OUR RECORDS.

THANK YOU,

MELLISA STEWART
CLEARWATER COUNTY ASSESSOR

MS/JMK

ENCLOSURES

RP36N02E236600A
5/01/2005

INSTRUMENT #:199357 WD
TYPE TO LOCATION 3301
CAMA AREA #: 1

SALES VERIFICATION

SELLER PRAIRIE LAND & TIMBER CO
BUYER BOWMAN, JAMES L & BARBARA G
ADDRESS 348 BERG RD
ONTARIO NY 14519

LEGAL DESCRIPTION
SEC 23 36N 2E
SESW & S 60' OF E1/2NESW

PROPERTY ADDRESS:

(PLEASE COMPLETE IF BLANK)

1. TOTAL SALE PRICE \$ _____ DATE OF SALE: Month _____ Year _____

3. IF PERSONAL PROPERTY (FURNITURE, FIXTURES, ETC.) WAS INCLUDED IN TOTAL PRICE, PLEASE ESTIMATE THE VALUE AND LIST THE ITEMS INCLUDED.

Value \$ _____ Items _____

4. THIS SALE WAS: ☐ An Ordinary Transaction ☐ A Trade ☐ An Estate Sale ☐ A Foreclosure
☐ Between Family ☐ An Easement ☐ A Condemnation ☐ Other _____

5. THE TYPE OF PROPERTY WAS: ☐ Commercial ☐ Residential ☐ Agricultural ☐ Other _____

WAS THIS BARE LAND? ☐ Yes ☐ No Is there a developed homesite ☐ yes ☐ no

CHECK UTILITIES ON PROPERTY: ☐ water ☐ power ☐ sewer

REMARKS AND CONDITIONS OF THE SALE _____

SIGNATURE _____ DATE _____

WORK PHONE _____ HOME PHONE _____

RP36N02E236001A
6/01/2005

INSTRUMENT #:199358 WD
TYPE RU LOCATION 3301
CAMA AREA #: 1

SALES VERIFICATION

SELLER KETCHAM, VIRGINIA 1/2 INT
BUYER BOWMAN, JAMES L & BARBARA G
ADDRESS 348 BERG RD
ONTARIO NY 014519

LEGAL DESCRIPTION
SEC 23 36N 2E (NWSW)
TAX #1396

PROPERTY ADDRESS:

(PLEASE COMPLETE IF BLANK)

1. TOTAL SALE PRICE \$ _____ DATE OF SALE: Month _____ Year _____

3. IF PERSONAL PROPERTY (FURNITURE, FIXTURES, ETC.) WAS INCLUDED IN TOTAL PRICE, PLEASE ESTIMATE THE VALUE AND LIST THE ITEMS INCLUDED.

Value \$ _____ Items _____

4. THIS SALE WAS: ☐ An Ordinary Transaction ☐ A Trade ☐ An Estate Sale ☐ A Foreclosure
☐ Between Family ☐ An Easement ☐ A Condemnation ☐ Other _____

5. THE TYPE OF PROPERTY WAS: ☐ Commercial ☐ Residential ☐ Agricultural ☐ Other _____

WAS THIS BARE LAND? ☐ Yes ☐ No Is there a developed homesite ☐ yes ☐ no

CHECK UTILITIES ON PROPERTY: ☐ water ☐ power ☐ sewer

REMARKS AND CONDITIONS OF THE SALE _____

SIGNATURE _____ DATE _____

WORK PHONE _____ HOME PHONE _____

RP36N02E233601A
6/01/2005

INSTRUMENT #:199358 WD
TYPE RU LOCATION 3301
CAMA AREA #: 1

SALES VERIFICATION

SELLER KETCHAM, VIRGINIA 1/2 INT
BUYER BOWMAN, JAMES L & BARBARA G
ADDRESS 348 BERG RD
ONTARIO NY 14519

LEGAL DESCRIPTION
SEC 23 36N 2E
S 1/2 SWNW, W 1/2 NESW, NWSW
LESS TAX #1396

PROPERTY ADDRESS:

(PLEASE COMPLETE IF BLANK)

1. TOTAL SALE PRICE \$ _____ DATE OF SALE: Month _____ Year _____

3. IF PERSONAL PROPERTY (FURNITURE, FIXTURES, ETC.) WAS INCLUDED IN TOTAL PRICE, PLEASE ESTIMATE THE VALUE AND LIST THE ITEMS INCLUDED.

Value \$ _____ Items _____

4. THIS SALE WAS: ☐ An Ordinary Transaction ☐ A Trade ☐ An Estate Sale ☐ A Foreclosure
☐ Between Family ☐ An Easement ☐ A Condemnation ☐ Other _____

5. THE TYPE OF PROPERTY WAS: ☐ Commercial ☐ Residential ☐ Agricultural ☐ Other _____

WAS THIS BARE LAND? ☐ Yes ☐ No Is there a developed homesite ☐ yes ☐ no

CHECK UTILITIES ON PROPERTY: ☐ water ☐ power ☐ sewer

REMARKS AND CONDITIONS OF THE SALE _____

SIGNATURE _____ DATE _____

WORK PHONE _____ HOME PHONE _____

RP36N02E236002A
6/01/2005

INSTRUMENT #:199358 WD
TYPE RU LOCATION 3301
CAMA AREA #: 1

SALES VERIFICATION

SELLER KETCHAM, VIRGINIA 1/2 INT
BUYER BOWMAN, JAMES L & BARBARA G
ADDRESS 348 BERG RD
ONTARIO NY 14519

LEGAL DESCRIPTION
SEC 23 36N 2E
SWSW

PROPERTY ADDRESS:

(PLEASE COMPLETE IF BLANK)

1. TOTAL SALE PRICE \$ _____ DATE OF SALE: Month _____ Year _____

3. IF PERSONAL PROPERTY (FURNITURE, FIXTURES, ETC.) WAS INCLUDED IN TOTAL PRICE, PLEASE ESTIMATE THE VALUE AND LIST THE ITEMS INCLUDED.

Value \$ _____ Items _____

4. THIS SALE WAS: ☐ An Ordinary Transaction ☐ A Trade ☐ An Estate Sale ☐ A Foreclosure
☐ Between Family ☐ An Easement ☐ A Condemnation ☐ Other _____

5. THE TYPE OF PROPERTY WAS: ☐ Commercial ☐ Residential ☐ Agricultural ☐ Other _____

WAS THIS BARE LAND? ☐ Yes ☐ No Is there a developed homesite ☐ yes ☐ no

CHECK UTILITIES ON PROPERTY: ☐ water ☐ power ☐ sewer

REMARKS AND CONDITIONS OF THE SALE _____

SIGNATURE _____ DATE _____

WORK PHONE _____ HOME PHONE _____