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DEPARTMENT OF
WATER RESOURCES

COPY

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, 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
AJ 47-10231					
FD 47-10729					

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) are 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)

Emile L Haumont & Corneil Haumont
 Rt 4 Box 276

4. New Owner/Claimant(s)

Dean Haumont and Marie Haumont
 Name Connector (Check one): ☐ and, ☐ or, ☐ and/or

New Mailing Address

1472 E 4300 N Buhl, ID

City, State and ZIP Code

New Telephone Number

(208) 593-6092

5. Date you acquired the property

10/96

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) *x* *Pearl Haumant*
(include title if applicable)

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 <u><i>DS</i></u>	Date <u><i>11/3/06</i></u>	Fee <u><i>25</i></u>	
Receipted by <u><i>DS</i></u>	Date <u><i>11/3/06</i></u>	Receipt No. <u><i>4079008</i></u>	
Processed by _____	AJ Date _____	WR _____	Date _____

1 **GRANT DEED**

2 I, **GARNET HAUMONT**, a widow, dealing with her sole and separate
3 property, of 1496 East 4300 North, City of Buhl, County of Twin Falls, State of Idaho,
4 grant to **DEAN HAUMONT** and **MAXINE HAUMONT**, husband and wife, of 1472 East
5 4300 North, City of Buhl, County of Twin Falls, State of Idaho, the following described real
6 property situated in the County of Twin Falls, State of Idaho:

7 **Parcel No. 1**

8 Southeast Quarter of the Southeast Quarter (SE $\frac{1}{4}$ SE $\frac{1}{4}$),
9 Section 24, Township 9 South, Range 14 E., B.M., Twin Falls
10 County, State of Idaho

11 **Parcel No. 2**

12 A strip of land 250 feet long and 5 feet wide, described as
13 follows:

14 The West 5 feet of the 25 foot wide right-of-way on the West
15 side of the East boundary line of the SE $\frac{1}{4}$ SE $\frac{1}{4}$, Section 24,
16 Township 9 South, Range 14 E., B.M., said strip extending
17 from the Southeast corner of said section in a Northerly
18 direction parallel to the East boundary line of said section for
19 250 feet.

20 EXCEPTING AND RESERVING to Grantor a life estate in and
21 to the following property on condition that she pays the Twin
22 Falls County real property taxes applicable:

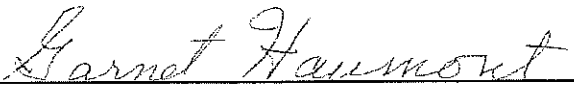
23 BEGINNING in the Southeast corner of the SE $\frac{1}{4}$ SE $\frac{1}{4}$, Section
24 24, Township 9 South, Range 14 E., B.M., which is the real
25 point of beginning;

26 THENCE North 190 feet;

THENCE West 120 feet;

THENCE South 190 feet;

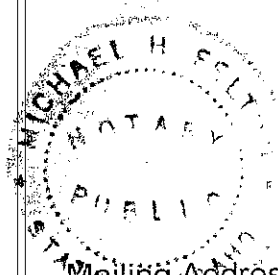
THENCE East 120 feet to the REAL POINT OF BEGINNING.

23 
24 GARNET HAUMONT
25
26

1
2 STATE OF IDAHO)
3 : ss
4 County of Twin Falls)

5 On this 25th day of October, 1996, before me, the undersigned, a Notary
6 Public in and for said County and State, personally appeared GARNET HAUMONT,
7 known to me to be the person whose name is subscribed to the foregoing instrument, and
8 acknowledged to me that she executed the same.

9 IN WITNESS WHEREOF, I have hereunto set my hand and affixed my
10 official seal the day and year last above written.



11 *[Signature]*

12 Notary Public for State of Idaho
13 Residing at Buhl, Idaho
14 My Commission Expires: 08/29/97

15 Mailing Address of Grantees:

16 Dean and Maxine Haumont
17 1472 E 4300 N
18 Buhl ID 83316

19
20
21 TWIN FALLS COUNTY, IDAHO
22 RECORDED FOR:

23 1996 OCT 29 A 9:25

19960184431

24 ROBERT S. FORT
25 EX-OFFICIO RECORDER

26 (C:\OFFICE\WPWIN\IGHI-DOO\2837\DEED.015)pm

DEPUTY: *[Signature]*

GRANT DEED - 2