

**STATE OF
DEPARTMENT OF WATER
NOTICE OF CHANGE IN WATER RIGHT**

Please print or type. Attach pages with additional information if forms are incomplete.

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HIFEB 06 2004

Department of Water Resources
is form. Eastern Region

10 SPLITS

1. Please list the water right number(s) and/or 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. List just the water right to be changed.

Water Right No(s).	Adjudication Claim No(s).	Split	Water Right No(s).	Adjudication Claim No(s).	Split
	22-131B				
	22-339B	☒			

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Department of Water Resources
Eastern Region

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, **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)

Clem + Irene Hansen

New Owner/Claimant(s)

GARY L. HANSEN

Name Connector (Check one): [] and, [] or, [] and/or

New Mailing Address

4045 BUCHANAN DR.

City, State and ZIP Code

FAIR OAKS, CA. 95628

New Telephone Number

(916) 966-1632

Date you acquired the property

7-18-1995

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)

Harold S. Hansen

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 _____
 Receipted by _____ Date _____ Receipt No. _____
 Processed by _____ AJ Date _____ WR _____ Date _____

120583

JUL 18 1995

PERSONAL REPRESENTATIVE'S DEED

TETON Co. Id.
Clerk Recorder

THIS INDENTURE, Made this 14th day of July, 1995,

between BONNIE GAIL CAUZZA, Personal Representative of the Estate of Clem Hansen, deceased, late of Tetonia, Teton County, Idaho, the party of the first part, and GARY L. HANSEN, of 4045 Buchanan Dr., Fair Oaks, CA 95628, the party of the second part,

WITNESSETH, That the said party of the first part, as the duly appointed, qualified and acting Personal Representative of said estate, pursuant to the provisions of the Last Will and Testament of said decedent, does hereby grant, convey and confirm unto the said party of the second part, and to his heirs and assigns forever, all right, title interest and estate of said decedent, at the time of said decedent's death, and also, all the right, title and interest that the said estate, by operation of law or otherwise, may have acquired since the decedent's death in and to the following described real estate situated in Teton County, Idaho, to-wit:

The SW1/4SE1/4 of Sec. 23, Twp. 6 N., Rge. 45 E.B.M. Together with all and singular the tenements, hereditaments and appurtenances thereunto belonging or in anywise appertaining, and the reversion and reversions, remainder and remainders and rents, issues and profits thereof;

TO HAVE AND TO HOLD, all and singular, the said premises, together with the appurtenances, unto the said party of the second part, and to his heirs and assigns forever.

Copy

120583

FILED

AT THE REQUEST OF

Bonnie Cauzza

AT 59 MINUTES PAST 2 P.M.

DATE July 18, 1995

Ala J. Drake

CLERK OF RECORDER

Filmed

Indexed

Platted

By

Nora Rigby
(DEPUTY)

120583

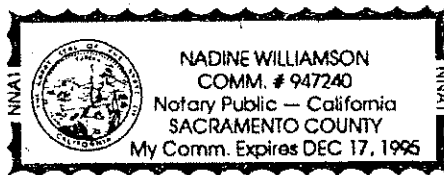
IN WITNESS WHEREOF, The said party of the first part,
Personal Representative, has, as aforesaid, hereunto set her hand
and seal the day and year first above written.

Bonnie Gail Cauzza
Bonnie Gail Cauzza

STATE OF CALIFORNIA,)
)
) ss.
County of SACRAMENTO.)

On this 14th day of July, 1995, before me, the undersigned, a Notary Public in and for said State, personally appeared BONNIE GAIL CAUZZA, ^{proved M.W. 7/14/95} known to me to be the person whose name is subscribed to the within instrument as the Personal Representative of the Estate of Clem Hansen and acknowledged to me that she executed the same as such Personal Representative of said estate.

IN WITNESS WHEREOF, I have hereunto set my hand and
affixed my official seal the day and year in this certificate first
above written.



Madeline Williamson
Notary Public for California
Residing at: Carmichael, CA
My Commission Expires: 12/17/95