

**NEW PROPERTY OWNER  
NOTICE OF CHANGE OF WATER RIGHT OWNERSHIP**

Please print or type

DATE OF CLOSING: \_\_\_\_\_

LEGAL DESCRIPTION OF PROPERTY: Township \_\_\_\_\_ Range \_\_\_\_\_  
Section \_\_\_\_\_, \_\_\_\_\_ 1/4 of \_\_\_\_\_ 1/4 of \_\_\_\_\_ 1/4, Govt. Lot \_\_\_\_\_, B.M. \_\_\_\_\_  
Lot \_\_\_\_\_, Block \_\_\_\_\_, Subdivision/Townsite \_\_\_\_\_  
If you have additional legal descriptions, please attach separate sheet.

☐ Served Only by a Public Service Water Supply (all water is received from a city or company who maintains water supply system, owns the water right, and bills the customer on a regular basis)

☐ Water Right Number(s)  
Assigned by IDWR: \_\_\_\_\_

See print out for #'s <sup>OK</sup> H.T.

☐ Name and address of Former  
Owner/Claimant(s)(Seller): Woodmansee-Johnson Rexburg Mill Ditch, Inc.  
\_\_\_\_\_  
\_\_\_\_\_

☒ New owner/Claimant  
(Purchaser): Woodmansee-Johnson Canal Company

☐ New Mailing Address: c/o O. Russell Wilding  
3560 E. 3000 N.  
Sugar City, ID 83448

☐ New Telephone Number: (208) 356-6184

☐ Does the change in ownership result in a splitting of the water right owned /claimed? \_\_\_\_yes ☒ No  
If yes, then describe the portion of the water right that is now owned/claimed by the new owner:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

☐ Attach proof of  
ownership, describe  
proof attached: \_\_\_\_\_  
(proof of ownership must describe either the property conveyed or include  
the claim number. Proof of ownership is not required if this form is  
signed by the former owner/claimant.)

☐ Signature of New BY: Woodmansee-Johnson Canal Company  
O. Russell Wilding Pres. Date 19 Aug 97  
Owner/Claimant(s) BY: Janett H. Burns Sec. Date 19 Aug 97  
Woodmansee-Johnson Rexburg Mill Ditch, Inc.  
☐ Signature of Former BY: O. Russell Wilding Pres. Date 19 Aug 97  
Owner/Claimant(s): BY: Janett H. Burns / Sec. Date 19 Aug 97  
(Signature of former claimant(s) is not  
required if proof of ownership is attached.)

**FOR IDWR USE ONLY:**

Initial Review and Data-Entry

Date: \_\_\_\_\_ By: \_\_\_\_\_

Further Action Needed:

Further Action Taken

Date: \_\_\_\_\_ By: \_\_\_\_\_

Final Review and Data Entry

Date: \_\_\_\_\_ By: \_\_\_\_\_

Claim Numbers of Split, if any:

Original to be mailed to Idaho Department of Water Resources  
Copies to Former Owner and New Owner

pj:water.for