

RECEIVED

Form 42-248/42-1409(6) Rev. 1/15

MAR 18 2021

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

Department of Water Resources
Eastern Region

Notice of Change in Water Right Ownership

Please Supply
\$25. - per water right
Recorded Warranty Deed
Copy of Deed
Certificate

1. List the numbers of all water rights and/or adjudication claim records to be changed. If you only acquired a portion of the water right or adjudication claim, check "Yes" in the "Split?" column. If the water right is leased to the Water Supply Bank, check "Yes". If you are not sure if the water right is leased to the Water Supply Bank, see #6 of the instructions.

Water Right/Claim No.	Split?	Leased to Water Supply Bank?	Water Right/Claim No.	Split?	Leased to Water Supply Bank?
22-74890*	Yes ☐	Yes ☐		Yes ☐	Yes ☐
	Yes ☐	Yes ☐		Yes ☐	Yes ☐
	Yes ☐	Yes ☐		Yes ☐	Yes ☐
	Yes ☐	Yes ☐		Yes ☐	Yes ☐
	Yes ☐	Yes ☐		Yes ☐	Yes ☐

2. Previous Owner's Name: E. Lyle Hansen
Name of current water right holder/claimant
3. New Owner(s)/Claimant(s): Rose Irene Hansen
New owner(s) as listed on the conveyance document
- Mailing address: 291 N. 2500 E. St. Anthony City: Idaho State: 83445 ZIP: 83445
- Telephone: 208 624-7223 Email: _____

4. If the water rights and/or adjudication claims were split, how did the division occur?
☐ The water rights or claims were divided as specifically identified in a deed, contract, or other conveyance document.
☐ The water rights or claims were divided proportionately based on the portion of their place(s) of use acquired by the new owner.
5. Date you acquired the water rights and/or claims listed above: 1981-85
6. If the water right is leased to the Water Supply Bank changing ownership of a water right will reassign to the new owner any Water Supply Bank leases associated with the water right. Payment of revenue generated from any rental of a leased water right requires a completed IRS Form W-9 for payment to be issued to an owner. A new owner for a water right under lease shall supply a W-9. Water rights with multiple owners must specify a designated lessor, using a completed Lessor Designation form. Beginning in the calendar year following an acknowledged change in water right ownership, compensation for any rental will go to the new owner(s).
7. This form must be signed and submitted with the following **REQUIRED** items:
☐ A copy of the conveyance document - warranty deed, quitclaim deed, court decree, contract of sale, etc. The conveyance document must include a legal description of the property or description of the water right(s) if no land is conveyed.
☐ Plat map, survey map or aerial photograph which clearly shows the place of use and point of diversion for each water right and/or claim listed above (if necessary to clarify division of water rights or complex property descriptions).
☐ Filing fee (see instructions for further explanation):
☐ \$25 per undivided water right.
☐ \$100 per split water right.
☐ No fee is required for pending adjudication claims.
☐ If water right(s) are leased to the Water Supply Bank AND there are multiple owners, a Lessor Designation form is required.
☐ If water right(s) are leased to the Water Supply Bank, the individual owner or designated lessor must complete, sign and submit an IRS Form W-9.

8. Signature: Rose Hansen Signature of new owner/claimant Title, if applicable: _____ Date: 3/18/2021
- Signature: _____ Signature of new owner/claimant Title, if applicable: _____ Date: _____

For IDWR Office Use Only:

Received by M. Petter Date 3-18-21 Receipt No. E046750 Receipt Amt. 25.00

Active in the Water Supply Bank? Yes ☐ No ☐ If yes, forward to the State Office for processing W-9 received? Yes ☐ No ☐

Name on W-9 _____ Approved by JB Processed by JB Date 5/18/2021

427668

PERSONAL REPRESENTATIVE'S DEED

THIS INDENTURE, Made this 15th day of August, 1988, between ROSE IRENE HANSEN, Personal Representative of the Estate of Earl Lyle Hansen, deceased, late of Fremont County, State of Idaho, the party of the first part, and ROSE IRENE HANSEN, of Route 1 Box 42-4, St. Anthony, Idaho 83445, 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, to distribute and convey the hereinafter described property to said decedent's heir, pursuant to the intestate laws of the State of Idaho, does by these presents grant, convey and confirm unto the said party of the second part, and to her 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 Decedent's undivided one-half interest (the other undivided one-half interest belonging to ROSE IRENE HANSEN), in and to the following described real estate situated in Fremont County, Idaho, to-wit:

a. Two hundred forty acre farm, described as follows:

Southeast Quarter and North Half
Northeast Quarter of Section 13,
Township 7 North, Range 41 East,
Boise Meridian, together with the
following described sprinkler irrigation
system:
One 400 H.P. Electric Pump Motor and
panel

437668

Well

One 100 H.P. Electric Booster Motor, Pump
and Panel

260 lengths of Lateral Pipe

14 lengths of Swing Line

Subject to the lien of a Federal Land Bank mortgage
thereon.

b. Seventeen acres, home and farmstead
described as follows:

Commencing at a point 2,635 feet North of
the Southeast corner of Section 23, Twp. 7
N., Rge. 40, E.B.M., and running thence
South 1505 feet, thence North 89°55' West
655 feet, thence North 1505 feet, thence
Southeast 655 feet to the point of
beginning.

Subject to the lien of a Federal Land Bank
mortgage thereon.

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 her heirs and assigns forever.

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.


Rose Irene Hansen

STATE OF IDAHO,

ss.

County of Madison

On this 15th day of August, 1988, before me, the
undersigned, a Notary Public in and for said State, personally
appeared Rose Irene Hansen, known to me to be the person whose

name is subscribed to the within instrument as the Personal Representative of the Estate of Earl Lyle 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.



Debra A. Keller
Notary Public for Idaho
Residing at: Rexburg, Idaho
My Commission Expires: 11-15-93

Microfilm No. 977658
216 Day Oct 19 88
At 3:02 O'Clock P M
BETTY J. HILL
FREMONT CO. RECORDER
Fee \$ 4.00 Deputy
Recorded At Request of
Buffy Thatcher

STATE OF IDAHO

State File No. _____
County File No. **113610**

County of Madison

Marriage License

BOOK **5** PAGE **358**

KNOW ALL MEN BY THIS CERTIFICATE: That any regularly ordained minister of the Gospel, authorized by the rites and usages of the church or denomination of Christians, Hebrews, or religious body of which he may be a member, or any judge or Justice of the Peace, or competent officer to whom this may come, he not knowing of any lawful impediments thereto, is hereby authorized and empowered to solemnize the rites of Matrimony between:

GROOM

1. Full Name Earl Lyle Hansen
2. Address: St. Anthony, Fremont, Idaho
City County State
3. Age 21 4. Color or Race W 5. Single X 6. Widowed _____ 7. Divorced _____
8. Birthplace: City Rexburg, State Idaho

AND

BRIDE

9. Full Name Rose Irene Machen
10. Address Rexburg, Madison, Idaho
City County State
11. Age 19 12. Color or Race W 13. Single X 14. Widowed _____ 15. Divorced _____
16. Maiden Name if previously married _____
17. Birthplace: City Rexburg, State Idaho

And to certify the same to said parties, or either of them under his hand and seal, in his ministerial or official capacity, and thereupon he is required to deliver this copy to the parties so married.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my official seal, at Rexburg, Madison County, Idaho, this 3rd day of November, A. D. 19 59.

S. L. M. Penley
Recorder
Mafine Nave
Deputy

Marriage Certificate

I, FRANCIS M. DAVIS, a Minister of the Church of Jesus Christ of Latter-day Saints, residing at Shelley, in the county of Bingham in the State of Idaho do certify that, in accordance with the authority on me conferred by the above license, I did on this 4th day of November in the year A. D. 19 59 at Idaho Falls in the County of Bonneville, in the State of Idaho, solemnize the rites of matrimony between Earl Lyle Hansen of St. Anthony in the County of Fremont, of the State of Idaho and Rose Irene Machen of Rexburg, in the County of Madison of the State of Idaho, in the presence of Earl B. Hansen and David E. Balnap.
WITNESS My Hand at the County aforesaid, this 4th day of November, A. D. 19 59.

In the presence of:

Earl B. Hansen
and David E. Balnap

Date received

by County Recorder 11/9/59

Signature S. L. M. Penley

Recorded

County Recorder, Book _____

Page _____

Date Received

by State Registrar

STATE OF IDAHO
DEPARTMENT OF HEALTH AND WELFARE



BUREAU OF VITAL STATISTICS,
STANDARDS AND LOCAL HEALTH
SERVICES

450 W. STATE ST.
BOISE, IDAHO 83720

CERTIFICATE OF DEATH

DATE FILED: DECEMBER 18, 1985 STATE FILE NUMBER: 85-06380
DECEDENT: EARL LYLE HANSEN
DATE OF DEATH: DEC. 06, 1985 PLACE OF DEATH: RFD 1, ST. ANTHONY, IDAHO
DATE OF BIRTH: JAN. 03, 1938 PLACE OF BIRTH: IDAHO
AGE: 47 YEARS SEX: MALE CITIZENSHIP: UNITED STATES VETERAN? NO
MARITAL STATUS: MARRIED SURVIVING SPOUSE: ROSE IRENE MACHEN
SOCIAL SECURITY NUMBER: [REDACTED] RESIDENCE: ST. ANTHONY, IDAHO
FATHER: EARL BEESLEY HANSEN
MOTHER: PEARL ROCK
MORTUARY: BIDWELL FUNERAL HOME ST. ANTHONY, ID
CERTIFIER: PAUL ROMRELL, CORONER AUTOPSY: NO

1. CAUSE OF DEATH, UNDERLYING CAUSE LAST: INTERVAL
CEREBRAL HEMORRHAGE INSTANTLY
SELF INFLICTED GUNSHOT

2. OTHER CONDITIONS CONTRIBUTING TO DEATH BUT UNRELATED TO ABOVE CAUSES:

TYPE OF INJURY: SUICIDE DATE OF INJURY: DECEMBER 06, 1985
HOUR OF INJURY: 09:45 A.M. INJURY AT WORK? NO
HOW INJURY OCCURRED: SHOT SELF IN RIGHT TEMPLE WITH 22-RIFLE
PLACE OF INJURY: HOME
LOCATION OF INJURY: 2 MILES SOUTH OF ST. ANTHONY IDAHO

DATE ISSUED: FEBRUARY 07, 1986

This is to certify that this is a true and correct reproduction or abstract of the official record
filed with the Idaho Department of Health & Welfare, Boise, Idaho.

Bee Biggs, R.N.

BEE BIGGS, R.N. State Registrar

DO NOT ACCEPT UNLESS ON SECURITY PAPER WITH EMBOSSED SEAL OF IDAHO
DEPT. OF HEALTH & WELFARE CLEARLY AFFIXED.
Section 39-273, Idaho Code

HW0139

DEPARTMENT OF HEALTH AND WELFARE

52090



State of Idaho

DEPARTMENT OF WATER RESOURCES

Eastern Region • 900 N SKYLINE DR STE A • IDAHO FALLS, ID 83402-1718

Phone: (208)525-7161 • Fax: (208)525-7177 • Website: www.idwr.idaho.gov

Brad Little
Governor

Gary Spackman
Director

May 18, 2021

ROSE IRENE HANSEN
241 N 2300 E
SAINT ANTHONY ID 83445-5615

Re: Change in Ownership for Water Right No(s): 22-7489

Dear Water Right Holder(s):

The Department of Water Resources (Department) acknowledges the receipt of correspondence changing ownership of the above referenced water right(s) to you. The Department has modified its records and has enclosed a computer-generated report for you.

Updating the ownership record for a water right does not reconfirm the validity of the right. When processing a Notice of Change in Water Right Ownership, the Department does not review the history of water use to determine if the right has been forfeited or deliberately abandoned through five years or more of non-use. To read more about water right forfeiture, including how to protect a water right from forfeiture, please see Idaho Code §§ 42-222 and 42-223.

Please note, water right owners are required to report any change of water right ownership and any change of mailing address to the Department within 120 days of the change. Reporting forms are available from any office of the Department, or from the Department's website.

If you have any questions concerning the enclosed information, please contact me at (208) 497-3787.

Sincerely,

Jonie Barg
Technical Records Specialist 1

Enclosure(s)

cc: WATER DISTRICT 100
HENRYS FORK GROUND WATER DISTRICT