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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
PD 75-04121E					

RECEIVED
MAY 27 2009

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) 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)

Robert Rowland
P.O. Box 4328 Burbank, CA 91505

4. New Owner/Claimant(s)

Rick M. and Sue M. Camilleri
 Name Connector (Check one): [] and, [] or, [] and/or

New Mailing Address

4075 Dry Creek Road

City, State and ZIP Code

Hearldsburg, CA 95448

New Telephone Number

(707) 433-1157

5. Date you acquired the property

5-15-09

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)

Rick Coniller
Susan Coniller

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 DMX Date 6/12/09 Fee \$25
 Receipted by DMX Date 6/12/09 Receipt No. E035118
 Processed by DMX AJ Date 6/12/09 WR DMX Date 6/12/09

PERSONAL REPRESENTATIVE'S DEED

THIS DEED, made by BOBBI-JO NELSON, as personal representative of The Estate of ROBERT W ROWLAND, deceased, Grantor, to RICK M CAMILLERI and SUSAN M CAMILLERI, husband and wife, whose address is 4075 Dry Creek Road, Healdsburg, California 95448, Grantee;

WHEREAS, pursuant to an Order of the Magistrate's Court of Lemhi County, Idaho, in the estate of the above-named deceased, filed as Lemhi County Case No. CV-2009-136, confirming on the Grantor the powers and authority granted to Personal Representatives under the Uniform Probate Code of the State of Idaho;

THEREFORE, for valuable consideration received, Grantor quitclaims, transfers, and conveys to Grantee RICK M CAMILLERI and SUSAN M CAMILLERI, husband and wife, the following parcel of land lying in Salmon, County of Lemhi, State of Idaho, more particularly described as:

Lot 1 of Holcomb Subdivision No. 2, according to the official plat thereof, filed in Book 4 of Plats at Page 61, official records of Lemhi County, ID.

with all thereto appurtenances and subject to all easements and restrictions of record.

EXECUTED this 11 day of May, 2009.

Bobbi-Jo Nelson, Personal
BOBBI-JO NELSON *Representative of*
Personal Representative of the *The Estate of*
Estate of Robert W Rowland *Robert W. Rowland*

STATE OF CALIFORNIA)
)ss
County of _____)

On this _____ day of May, 2009, before me, the undersigned, a notary public in and for said state, personally appeared, Bobbi-Jo Nelson, known or identified to me to be the person whose name is subscribed to the within instrument, as Personal Representative of the Estate of Robert W Rowland, deceased, and acknowledged to me that she executed the same as Personal Representative.

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

NOTARY PUBLIC FOR CALIFORNIA

Residing at: _____

My Commission Expires: _____

Notary Certificate Attached

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California

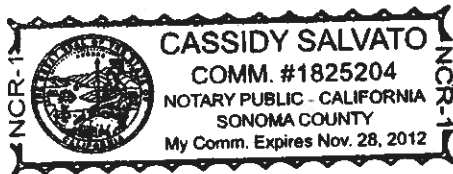
County of SonomaOn May 1st 2009 before me, Cassidy Salvato Notary Public

Date

Here Insert Name and Title of the Officer

personally appeared Bobbi Jo Nelson

Name(s) of Signer(s)



who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Place Notary Seal Above

Signature

Signature of Notary Public

OPTIONAL

Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

Description of Attached Document

Title or Type of Document: _____

Document Date: _____ Number of Pages: _____

Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____

- ☐ Individual
☐ Corporate Officer — Title(s): _____
☐ Partner — ☐ Limited ☐ General
☐ Attorney in Fact
☐ Trustee
☐ Guardian or Conservator
☐ Other: _____

Signer Is Representing: _____

 RIGHT THUMBPRINT
OF SIGNER
Top of thumb here

Signer's Name: _____

- ☐ Individual
☐ Corporate Officer — Title(s): _____
☐ Partner — ☐ Limited ☐ General
☐ Attorney in Fact
☐ Trustee
☐ Guardian or Conservator
☐ Other: _____

Signer Is Representing: _____

 RIGHT THUMBPRINT
OF SIGNER
Top of thumb here

State of Idaho) SS No. **279726**
County of Lemhi)

This instrument was filed for record at the request
of Lemhi Title
at 10:35 o'clock a.m. 5-18 2009

and duly filmed and indexed in the records of Lemhi
County

Terri J. Morton
Ex-Officio Recorder

By Elyssa Cardin Deputy

Fee 9.00

Return to LT