

RECEIVED

MAY 23 2006

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES
NOTICE OF CHANGE IN WATER RIGHT OWNERSHIP

DEPARTMENT OF WATER RESOURCES

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
<u>72-184</u>	_____	___	_____	_____	___
<u>72-4020</u>	_____	___	_____	_____	___
_____	_____	___	_____	_____	___
_____	_____	___	_____	_____	___
_____	_____	___	_____	_____	___

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) James R. Bennetts and Jo Ann Bennetts
PO Box 36
Challis, ID 83226
4. New Owner/Claimant(s) Challis Irrigation Company
 Name Connector (Check one): [] and, [] or, [] and/or
- New Mailing Address PO Box 71
- City, State and ZIP Code Challis, ID 83226
- New Telephone Number (208) 879-5696 - Sharlene Miller
Challis Irrigation Company
5. Date you acquired the property NA Secretary/Treasurer

SUPPORT DATA

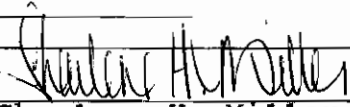
IN FILE # 72-0184

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)


Sharlene H. Miller - Secretary
Challis Irrigation Company

See attached Idaho Annual Report Form

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 _____
Received by Kaw
Processed by _____ AJ

Date _____
Date 5/23/06
Date _____

Fee 100⁰⁰ for 4-
Receipt No. C081318
WR _____ Date _____

(See other Repts. 72-239
72-4010)



STATE OF IDAHO
BEN YSURSA
SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

PRESORTED
FIRST-CLASS
U.S. POSTAGE PAID
Boise, ID
PERMIT No. 1

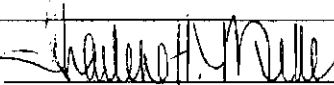
IDAHO ANNUAL REPORT FORM C 21198
RETURN SERVICE REQUESTED Use this form to file online at www.sos.idaho.gov

THIS IS THE ONLY NOTICE YOU WILL RECEIVE

CHALLIS IRRIGATION COMPANY
SHARLENE MILLER
P. O. BOX 71
CHALLIS, ID 83226

KKHGTP 1 83226



No. C 21198		Due no later than March 31, 2006		2. Registered Agent and Office NO PO BOX	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form		SHARLENE MILLER PO BOX 71 CHALLIS HOT SPRINGS RD CHALLIS, ID 83226	
		1. Mailing Address - Correct in this box, if applicable			
		CHALLIS IRRIGATION COMPANY SHARLENE MILLER P. O. BOX 71 CHALLIS, ID 83226		3. New Registered Agent Signature	
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.					
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President	Gary Chamberlain	HC 63 Box 1770	Challis	ID	83226
Vice Pres	Ryan Hunt	PO Box 719	Challis	ID	83226
Secretary	Sharlene Miller	HC 63 Box 1771-1	Challis	ID	83226
Director	Cliff Hansen	HC 63 Box 1777	Challis	ID	83226
Director	Doug James	PO Box 333	Challis	ID	83226
Director	Jim Thomas	HC 63 Box 1784	Challis	ID	83226
5. Organized Under the Laws of: IDAHO C 21198		6. Signature  Name (Typed or Printed) Sharlene H. Miller		Date 1/24/06 Title Secretary	

Issued 01/04/2006

Do Not Tape or Staple

200603004003

*mailed 1-25-06
EM*