

STATE OF IDAHO

DEPARTMENT OF WATER RESOURCES

NOTICE OF CHANGE IN WATER RIGHT OWNERSHIP

RECEIVED

JUL 14 2004

Please print or type. Attach pages with additional information. Instructions are included at the end of this form.
Incomplete forms will be returned.

Department of Water Resources
Eastern Region

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, 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
29-307A					

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2. The following **REQUIRED** information must be submitted with this form:

- A. The appropriate **FILING FEE**. See instructions for fee amounts. \$25 -
- 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) 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)

James L. Chandler
P.O. Box 505 Inkom

4. New Owner/Claimant(s)

~~James L. Chandler~~ JEFF And Kristie LARSEN

Name Connector (Check one): ☒ and, ☐ or, ☐ and/or

New Mailing Address

P.O. Box 424

City, State and ZIP Code

Inkom, Id. 83245

New Telephone Number

308 244-2362

5. Date you acquired the property

OCT. 17, 2003

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 _____

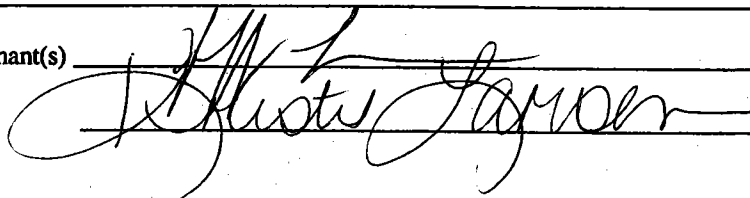
Water Use	Diversion Rate or Volume (cubic feet per second or acre-feet per annum)	Description (acres, number and type of stock, homes, etc)
Irrigation	_____	_____
Stock	_____	_____
Domestic	_____	_____
Other	_____	_____
Total	_____	_____

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)



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 <u>JC</u>	Date <u>7-15-04</u>	Fee <u>\$25 -</u>
Received by <u>JC</u>	Date <u>7-15-04</u>	Receipt No. <u>E030048</u>
Processed by <u>AJ</u>	Date _____	WR _____ Date _____

WARRANTY DEED

20328143

FOR VALUE RECEIVED, JAMES L. CHANDLER and AUDREY M. CHANDLER, husband and wife, (hereinafter "Grantor"), do hereby grant, bargain, sell and convey unto JEFFERY R. LARSEN and KRISTIE A. LARSEN, husband and wife, whose current address is P. O. Box 424, Inkom, Idaho 83245 (hereinafter "Grantee"), their heirs and assigns forever, the following described premises in Bannock County, Idaho, to-wit:

Parcel No. R4015003702
S11-T7S-R36E
TR SW4SW4 TAX 46 33.90 AC
1.50 AC R/W

TO HAVE AND TO HOLD the said premises, with their appurtenances, including all water rights. Grantor shall retain all gas, oil and mineral rights.

Grantor does hereby covenant that they are the owner in fee simple of said premises, that they are free from all encumbrances excepting other easements of record, conflicts in boundary lines, shortage in area, and any facts which a correct survey and inspection of the premises would disclose and which are not shown by the public records, and that they will warrant and defend the same from all lawful claims.

DATED this 17th day of October, 2003

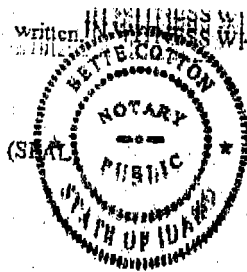
James L. Chandler
JAMES L. CHANDLER

Audrey M. Chandler
AUDREY M. CHANDLER

STATE OF IDAHO)
Count of Bannock)

On this 17th day of October, 2003, before me, the undersigned, a Notary Public in and for said State, personally appeared JAMES L. CHANDLER and AUDREY M. CHANDLER, husband and wife, known to me to be the persons whose names are subscribed to the foregoing and acknowledged to me that they executed the same.

Witness my hand and seal the day and year first above written.



Bette Cotton
NOTARY PUBLIC FOR IDAHO
Residing at: Bannock, Idaho
My Commission expires: 4/22/2011

20328143
James L. Chandler
RECORDED AT REQUEST OF
FEE \$30 DEPUTY #