

RECEIVED

MAR 22 2002

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
63-05183					
63-05184					

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) NEAL & DONNA DONALDSON
P.O. BOX 4461 BOISE, IDAHO 83711
4. New Owner/Claimant(s) SADIE L. HART TRUST
 Name Connector (Check one): ☐ and, ☐ or, ☐ and/or
- New Mailing Address 17 RED FIR PLACE
- City, State and ZIP Code BOISE, IDAHO 83716
- New Telephone Number (208) 631-4456
5. Date you acquired the property RECORDED 99 MAR 9 4:22 PM

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.

N/A 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	_____	_____

N/A 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) Alan D. Hart, TRUSTEE
 (include title if applicable) SADIE L. HART TRUST

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 Janis Fontaine Date 3/20/02 Fee 50⁰⁰
 Receipted by Janis Fontaine Date 3/20/02 Receipt No. W028911
 Processed by _____ AJ Date _____ WR _____ Date _____

Case - # 01510

Warranty Deed

For Value Received LAWRENCE M. RENNER, A MARRIED PERSON AS HIS SOLE AND SEPARATE PROPERTY AND RANDALL M. COOK AND SUZANNE J. COOK, HUSBAND AND WIFE AND EUGENE B. LUCAS AND EDITH D. LUCAS, HUSBAND AND WIFE

the grantor s do hereby grant, bargain, sell and convey unto **SADIE L. HART TRUST**

whose current address is PO BOX 375 NAMPA, IDAHO 83653

the grantee, the following described premises, in BOISE

County Idaho, to wit:

SEE ATTACHED EXHIBIT "A"

INST# 172283
REQUEST Alliance

99 MAR -9 PM 4:22

LAISE COUNTY, RECORDER

BY M. M. M. M. M.
TYPE Dud Fee 15.00/c
5pgs

TO HAVE AND TO HOLD the said premises, with their appurtenances unto the said Grantee, heirs and assigns forever. And the Grantors do hereby covenant to and with the said Grantee, that THEY the owner B in fee simple of said premises that they are free from all encumbrances, EXCEPT those to which this conveyance is expressly made subject and those made, suffered or done by the Grantee; and subject to reservations, restrictions, dedications, easements, rights of way and agreements, (if any) of record, and general taxes and assessments, including irrigation and utility assessments, (if any) for the current year, which are not due and payable, and that Grantor G will warrant and defend the same from all lawful claims whatsoever.

Dated: February 5, 1999

RANDALL M. COOK

HUZARNE J. COOK

LAWRENCE M. RENNER

EUGENE D. LUCAS

EDITH D. LUCAS

STATE OF _____, COUNTY OF _____

On this day of 19

Before me, a notary public in and for said State, personally appeared

RANDALL M. COOK, EUGENE B. LUCAS,

SUZANNE J. COOK, EDITH D. LUCAS,

LAWRENCE M. RENNER

known to me to be the person S whose name S

submitted to the within instrument, and acknowledged to me that

THEY executed the king.

ՀԱՅԱՍՏԱՆԻ ԻՆՏԵՐՆԵՏԱԿԱՆ ԲԻԲԼԻՅԱ

Residing at

Comm. Baptes :

klakus

ORDER NO. 98077549 SRC

EXHIBIT "A"

TRACT A

The Northeast Quarter of the Northeast Quarter of Section 31, Township 5 North, Range 4 East, Boise Meridian, Boise County, Idaho.

TRACT C

The Southwest Quarter of the Northeast Quarter of Section 31, Township 5 North, Range 4 East, Boise Meridian, Boise County, Idaho.

TRACT D

The Southeast Quarter of the Northeast Quarter of Section 31, Township 5 North, Range 4 East, Boise Meridian, Boise County, Idaho.

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California }
County of Humboldt } ss.

On 2-26-99, before me, Leah Mantooth Notary Public,
personally appeared Lawrence M. Renner,
Name and Title of Officer (e.g., "Jane C. Public")
Name(s) of Signer(s)

☒ personally known to me
☐ 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.

WITNESS my hand and official seal.

Leah Mantooth
Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though this 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: Warranty Deed

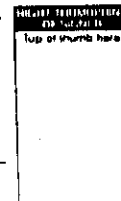
Document Date: 2-5-99 Number of Pages: 2

Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer

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

Signer is Representing: _____



CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California }
County of Humboldt }

On 2-25-99, before me, Leslie Montalvo, Notary Public
Date Name and Title of Officer in G. Jones Box, Notary Public
personally appeared Edith D. Lucas and Eugene S. Lucas
Name(s) of Signer(s)

- ☒ personally known to me
☐ proved to me on the basis of satisfactory evidence



to be the person(s) whose name(s) he/she 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.

WITNESS my hand and official seal.
Leslie Montalvo
Signature of Notary Public

Place Notary Seal Above

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: Marriage Affid

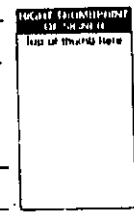
Document Date: 2-5-99 Number of Pages: 2

Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer

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

Signer Is Representing: _____

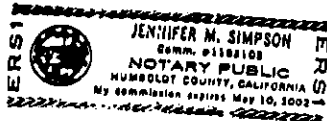


CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

Ms. 1007

State of California
 County of Humboldt
 On 3/1/99 before me, Jennifer M. Simpson
DATE NAME, TITLE OF OFFICER - E.G., "JANE DOE, NOTARY PUBLIC"
 personally appeared Randall M Cook and Suzanne J Cook
NAME(S) OF SIGNER(S)

☐ personally known to me - OR - ☐ 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.



WITNESS my hand and official seal.

Jennifer M. Simpson
SIGNATURE OF NOTARY

OPTIONAL

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

CAPACITY CLAIMED BY SIGNER

- ☐ INDIVIDUAL
☐ CORPORATE OFFICER

- TITLE(S)
☐ PARTNER(S) ☐ LIMITED
☐ ATTORNEY-IN-FACT ☐ GENERAL
☐ TRUSTEE(S)
☐ GUARDIAN/CONSERVATOR
☐ OTHER: _____

SIGNER IS REPRESENTING:
NAME OF PERSON(S) OR ENTITY(IES)

DESCRIPTION OF ATTACHED DOCUMENT

TITLE OR TYPE OF DOCUMENT

NUMBER OF PAGES

DATE OF DOCUMENT

SIGNER(S) OTHER THAN NAMED ABOVE