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MAY 13 2004

Department of Water Resources

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Department of Water Resources
Southern Region

Form 42-248/42-1409(6) July, 2000

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
47.10309					

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)

Zina Kirk Tolman

4. New Owner/Claimant(s)

Shawn J. Brennan

Name Connector (Check one): [] and, [] or, [] and/or

New Mailing Address

787 W. Addison Ave. West

City, State and ZIP Code

Twin Falls, ID 83301

New Telephone Number

208 430-3138

5. Date you acquired the property

4-30-04

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 [Signature] Date 5/12/04 Fee 25.00
 Received by [Signature] Date 5/12/04 Receipt No. 5026729
 Processed by [Signature] AJ Date _____ WR _____ Date _____

Clerk No. T031591

WARRANTY DEED

Twin Falls County, Idaho

Recorded for:

TWIN FALLS TITLE

03:56pm Apr. 30, 2004

2004 - 009297

No. of Pages: 2 Fee: \$6.00
KRISTINA GLASCOCK
County Clerk
Deputy Clerk

For Value Received

**CLARA MORRISON, PERSONAL REP. FOR THE ESTATE OF ZINA KIRK TOLMAN,
DECEASED**

the grantor(s), do(es) hereby grant, bargain, sell, and convey unto

SHAWN BRENNAN, an unmarried man

the grantee(s), whose current address is

787 ADDISON AVE WEST , TWIN FALLS, ID 83301

the following described premises, to-wit:

Township 10 South, Range 17 East of the Boise Meridian, Twin Falls County, Idaho

SECTION 17: BEGINNING at the Section Corner common to SECTIONS 7, 8, 18, 17,

TOWNSHIP 10 South, Range 17 East of the Boise Meridian, Twin Falls County, Idaho;

**THENCE South 47°09'53" East 975.15 to an iron pin, which is the REAL POINT OF
BEGINNING;**

THENCE South 65°6'48" East 295.75 feet to a metal pipe;

THENCE South 32°44'57" West 412.32 feet to an iron pin;

THENCE South 89°37'19" West 34.87 feet to a metal pipe;

**THENCE North 01°15'40" West 471.58 feet to an iron pin which is the REAL POINT OF
BEGINNING.**

SEE ATTACHED EXHIBIT "A"

TO HAVE AND TO HOLD the said premises, with their appurtenances unto the said Grantee(s), his/her/their heirs and assigns forever. And the said Grantor(s) do(es) hereby covenant to and with the said Grantee(s), that he/she/they are the owner(s) in fee simple of said premises; that said premises are free from all encumbrances except current years taxes, levies, and assessments, and except U. S. Patent reservations, restrictions, easements of record, and easements visible upon the premises, and that he/she/they will warrant and defend the same from all claims whatsoever.

Dated: April 28, 2004

Clara Morrison, PERSONAL REP.
CLARA MORRISON, PERSONAL REP

STATE OF IDAHO

: ss

COUNTY OF TWIN FALLS

On This 30th day of April, in the year 2004, before me, a Notary Public in and for said State, personally appeared **CLARA MORRISON**, known or identified to me to be the person(s) whose name(s) is/are subscribed to the within Instrument as the personal representative of the estate of Zina Kirk Tolman, deceased, and acknowledged to me that he/she/they executed the same as such Personal Representative.

WITNESS my hand and official seal.

Melissa M. Drollinger
Notary Public of Idaho
Residing at Twin Falls, Idaho
Commission Expires: December 10, 2005

