Form 02-248/42-1409(6) Rev. 6/22

RECEIVED
JUN 20 2025
DEPT. OF WATER RESOURCES
EASTERN REGION

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

NOTICE OF CHANGE IN WATER RIGHT OWNERSHIP

1. List the numbers of all water rights and/or adjudication claim records to be changed. If you only acquired a portion of the water right or adjudication claim, check "*Yes*" in the "*Split?*" column. If the water right is leased to the Water Supply Bank, check "*Yes*". If you are not sure if the water right is leased to the Water Supply Bank, see #7 of the instructions.

Water Right/Claim No.	Split?	Leased to Water Supply Bank?	Water Right/Claim No.	Split?	Leased to Water Supply Bank?
✓ 22-7189 OK	Yes ☒	Yes ☐	22-7189	Yes ☐	Yes ☐
	Yes ☐	Yes ☐	22-14699	Yes ☐	Yes ☐
	Yes ☐	Yes ☐		Yes ☐	Yes ☐
	Yes ☐	Yes ☐		Yes ☐	Yes ☐
	Yes ☐	Yes ☐		Yes ☐	Yes ☐

2. Previous Owner's Name: William and Helen Cowles Cochrane
   Name of current water right holder/claimant

3. New Owner(s)/Claimant(s): Roberts Survivors Trust
   New owner(s) as listed on the conveyance document — Name connector ☐ **and** ☐ **or**

   993 Debra Dr. — Mailing address
   Santa Barbara — City
   CA — State
   93110 — Zip
   805 895 7418 — Telephone
   kelkar@aol.com — Email

4. If the water rights and/or adjudication claims were split, how did the division occur?
   ☐ The water rights or claims were divided as specifically identified in a deed, contract, or other conveyance document.
   ☒ The water rights or claims were divided proportionately based on the portion of their place(s) of use acquired by the new owner.

5. Date you acquired the water rights and/or claims listed above: June, 13th 2018.

6. Do you own the land identified as the water right place of use? Yes ☒ No ☐
   - If no, attach evidence that written notice of the change of water right ownership has been delivered to the landowner of record.

7. This form must be signed and submitted with the following **REQUIRED** items:
   ☒ A copy of the conveyance document – warranty deed, quitclaim deed, court decree, contract of sale, etc. The conveyance document must include a legal description of the property or description of the water right(s) if no land is conveyed.
   ☒ Plat map, survey map or aerial photograph which clearly shows the place of use and point of diversion for each water right and/or claim listed above (if necessary to clarify division of water rights or complex property descriptions).
   ☒ Filing fee (see instructions for further explanation): $100
   - $25 per *undivided* water right.
   - $100 per *split* water right.
   - No fee is required for pending adjudication claims.

   SUPPORT DATA IN FILE # 22-7189

   ☐ If water right(s) are leased to the Water Supply Bank AND there are multiple owners, a Lessor Designation form is required.
   ☐ If water right(s) are leased to the Water Supply Bank, the individual owner or designated lessor must complete, sign and submit an IRS Form W-9.

8. Signature: See attachment
   Signature of new owner/claimant — Title, if applicable — Date
   Print name

   Signature:
   Signature of new owner/claimant — Title, if applicable — Date
   Print name

For IDWR Office Use Only: $100.- for this app

Receipted by M. Pettes Date 6-20-25 Receipt No. E050932 Receipt Amt. 200.00

Active in the Water Supply Bank? Yes ☐ No ☐ If yes, forward to the State Office for processing W-9 received? Yes ☐ No ☐

Name on W-9 Approved by JB Processed by dc Date 10/3/2025

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

NOTICE OF CHANGE IN WATER RIGHT OWNERSHIP

1. List the numbers of all water rights and or adjudication claim records to be changed. If you only acquired a portion of the water right or adjudication claim, check "Yes" in the "Split?" column. If the water right is leased to the Water Supply Bank, check "Yes". If you are not sure if the water right is leased to the Water Supply Bank, see #7 of the instructions.

Water Right Claim No.	Split?	Leased to Water Supply Bank?	Water Right/Claim No.	Split?	Leased to Water Supply Bank?
22-7189	Yes ☒	Yes ☐		Yes ☐	Yes ☐
	Yes ☐	Yes ☐		Yes ☐	Yes ☐
	Yes ☐	Yes ☐		Yes ☐	Yes ☐
	Yes ☐	Yes ☐		Yes ☐	Yes ☐
	Yes ☐	Yes ☐		Yes ☐	Yes ☐

2. Previous Owner's Name: _____
Name of current water right holder/claimant

3. New Owner(s) Claimant(s): Roberts Survivors Trust
New owner(s) as listed on the conveyance document — Name connector ☐ and ☐ or

993 DeLura Dr. — Mailing address
Santa Barbara — City
CA — State
93110 — Zip
805 595 7418 — Telephone
kelkar@aol.com — Email

4. If the water rights and or adjudication claims were split, how did the division occur?
   - ☐ The water rights or claims were divided as specifically identified in a deed, contract, or other conveyance document.
   - ☐ The water rights or claims were divided proportionately based on the portion of their place(s) of use acquired by the new owner.

5. Date you acquired the water rights and/or claims listed above: _____.

6. Do you own the land identified as the water right place of use? Yes ☐ No ☐
   - If no, attach evidence that written notice of the change of water right ownership has been delivered to the landowner of record.

7. This form must be signed and submitted with the following **REQUIRED** items:
   - ☐ A copy of the conveyance document – warranty deed, quitclaim deed, court decree, contract of sale, etc. The conveyance document must include a legal description of the property or description of the water right(s) if no land is conveyed.
   - ☐ Plat map, survey map or aerial photograph which clearly shows the place of use and point of diversion for each water right and or claim listed above (if necessary to clarify division of water rights or complex property descriptions).
   - ☐ Filing fee (see instructions for further explanation):
     - $25 per *undivided* water right.
     - $100 per *split* water right.
     - No fee is required for pending adjudication claims.
   - ☐ If water right(s) are leased to the Water Supply Bank AND there are multiple owners, a Lessor Designation form is required.
   - ☐ If water right(s) are leased to the Water Supply Bank, the individual owner or designated lessor must complete, sign and submit an IRS Form W-9.

8. Signature: Helen J Roberts — Signature of new owner/claimant
Title, if applicable
6-15-25 — Date
Helen J Roberts — Print name

Signature: _____ — Signature of new owner/claimant
Title, if applicable
Date
Print name

For IDWR Office Use Only:

Receipted by_____ Date_____ Receipt No._____ Receipt Amt. _____

Active in the Water Supply Bank? Yes ☐ No ☐ If yes, forward to the State Office for processing W-9 received? Yes ☐ No ☐

Name on W-9_____ Approved by_____ Processed by_____ Date _____

SOLLENBERGER SCOTT W
SESW
PEREZ VASQUEZ FIDELINA
SW 4
30
SWSE
ROBSON HILLTOP FARMS LLC
SESE
SWSW
29
SHIPCOTT FAMILY TRUST
W 12000 N
BYMAN, PHILLIP
NWNW
NENW
TETON FLATS FARMS LLC
NWNW 1
NWNE
NENE
RICHINS, THOMAS H
ROBERTS SUPPORTS TRUST
07N45E
ROBSON HILLTOP FARMS LLC
SENW
SWNE
31
SENE
SWNW
32
ROBSON HILLTOP FARMS LLC
SWNW 2
ROBSON HILLTOP FARMS LLC
NWSE
NESW
NESE
NWSW
ROBSON GARY MERLE
NWSW

Instrument # 250855
TETON COUNTY, IDAHO
7-2-2018 02:25:00 PM No. of Pages: 2
Recorded for : FERGUSON CASE ORR PATERSON LLP
MARY LOU HANSEN Fee: 15.00
Ex-Officio Recorder Deputy
Index to: DEED, GRANT

RECORDING REQUESTED BY AND WHEN RECORDED MAIL TO:

FERGUSON CASE ORR PATERSON LLP
Attn: John C. Orr, Esq.
1050 South Kimball Road
Ventura, California 93004

MAIL TAX STATEMENTS TO:

Helen J. Roberts, Trustee
Roberts Survivor's Trust UA dated December 10, 1997
993 Debra Drive
Santa Barbara, CA 93110

Parcel Number: RP 07N45E310010

GRANT DEED

FOR NO CONSIDERATION, HELEN J. ROBERTS, Trustee of the James G. Roberts Family Trust dated December 10, 1997, of 993 Debra Drive, Santa Barbara, California 93110, hereinafter called "Grantor, does hereby grant and convey to **HELEN J. ROBERTS, Trustee of the Roberts Survivor's Trust UA dated December 10, 1997,** of 993 Debra Drive, Santa Barbara, California 93110, the following described property in the, County of Teton, State of Idaho, to wit:

The Northeast Quarter of Section 31, Township 7 North, Range 45 East, Boise Meridian, Teton County, Idaho.

TOGETHER WITH any and all other water rights including but not limited to that portion of Idaho Department of Water Resource license 22-7189 which has a portion of its place of use the above described premises) and improvements and appurtenances thereto; rents, issues and profits thereof; and reversions and remainders.

Dated: June 13, 2018

Helen J. Roberts
Helen J. Roberts, Trustee
James G. Roberts Family Trust dated
December 10, 1997

MAIL TAX STATEMENTS AS DIRECTED ABOVE.

Unofficial Copy

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

STATE OF CALIFORNIA)
) ss.
COUNTY OF VENTURA)

On June 13, 2018, before me, Carole A. Minkin, Notary Public, personally appeared HELEN J. ROBERTS, 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.

Carole A. Minkin
Notary Public

CAROLE A. MINKIN
Commission # 2138177
Notary Public - California
Ventura County
My Comm. Expires Jan 20, 2020

1674552

Unofficial Copy

Instrument # 248103
TETON COUNTY, IDAHO
11-13-2017 03:05:00 PM No. of Pages: 3
Recorded for : FERGUSON CASE ORR PATERSON
MARY LOU HANSEN Fee: 16.00
Ex-Officio Recorder Deputy
Index to: AFFIDAVIT OF SURVIVORSHIP

RECORDING REQUESTED BY AND WHEN RECORDED, MAIL TO:

John C. Orr, Esq.
Ferguson Case Orr Paterson LLP
1050 South Kimball Road
Ventura, CA 93004

MAIL TAX STATEMENTS TO:

HELEN J. ROBERTS, Trustee of
The James G. Roberts Family Trust Dated 12/10/1997
993 Debra Drive
Santa Barbara, CA 93110-1226

SPACE ABOVE THIS LINE FOR RECORDER'S USE

AFFIDAVIT DEATH OF TRUSTEE

APN: RP07N45E310010

STATE OF CALIFORNIA)
COUNTY OF VENTURA)

HELEN J. ROBERTS, of legal age, being first duly sworn, deposes and says:

1. JAMES GORDON ROBERTS, the decedent mentioned in the attached certified copy of Certificate of Death, is the same person as JAMES G. ROBERTS, named as the Trustee in that certain Trust Declaration dated December 10, 1997, commonly known as the JAMES G. ROBERTS FAMILY TRUST ("Trust") executed by JAMES G. ROBERTS and HELEN J. ROBERTS as Trustors.

2. At the time of the decedent's death, the decedent was the record owner, as a Trustee, of certain real property acquired by a Grant Deed which was signed by HELEN JEAN ROBERTS, of 993 Debra Drive, Santa Barbara, California 93110, as Grantor, and JAMES G. ROBERTS, of 993 Debra Drive, Santa Barbara, California 93110, as Grantor's Husband, on October 1, 2002, to JAMES G. ROBERTS AND HELEN J. ROBERTS, of 993 Debra Drive, Santa Barbara, California 93110, TRUSTEES OF THE JAMES G. ROBERTS FAMILY TRUST dated December 10, 1997, as Grantees, and recorded on October 9, 2002, as Instrument No. 150677 in the Official Records of Teton County, Idaho, covering the following described real property situated in said County, State of Idaho:

The Northeast Quarter of Section 31, Township 7 North,
Range 45 East, Boise Meridian, Teton County, Idaho.

3. I am the named successor Trustee of the same Trust under which said decedent held title as Trustee pursuant to the Deed described above, and am designated and empowered pursuant to the terms of said Trust to serve as Trustee thereof.

Dated: 6-15, 2017

THE JAMES G. ROBERTS FAMILY TRUST
DATED DECEMBER 10, 1997

By Helen J. Roberts
HELEN J. ROBERTS, Trustee

Unofficial Copy

A Notary Public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California)
County of Ventura)

Subscribed and sworn to (or affirmed) before me on this 15th day of June, 2017, by HELEN J. ROBERTS, proved to me on the basis of satisfactory evidence, to be the person(s) who appeared before me.

Signature Carole A. Minkin

CAROLE A. MINKIN
Commission # 2138177
Notary Public - California
Ventura County
My Comm. Expires Jan 20, 20

CAROLE A. MINKIN
Commission # 2138177
Notary Public - California
Ventura County
My Comm. Expires Jan 20, 2020

Unofficial Copy

STATE OF CALIFORNIA

CERTIFICATION OF VITAL RECORD

SANTA BARBARA COUNTY

PUBLIC HEALTH DEPARTMENT

3052017063162 — STATE FILE NUMBER

CERTIFICATE OF DEATH

STATE OF CALIFORNIA
USE BLACK INK ONLY / NO ERASURES, WHITEOUTS OR ALTERATIONS
VS-11 (REV 3/09)

3201742000764 — LOCAL REGISTRATION NUMBER

DECEDENT'S PERSONAL DATA

1. NAME OF DECEDENT - FIRST (Given): JAMES
2. MIDDLE: GORDON
3. LAST (Family): ROBERTS
AKA, ALSO KNOWN AS – Include full AKA (FIRST, MIDDLE, LAST): SANDY GORDON ROBERTS
4. DATE OF BIRTH mm/dd/yyyy: 07/30/1946
5. AGE Yrs.: 70
If UNDER ONE YEAR: Months: | Days:
If UNDER 24 HOURS: Hours: | Minutes:
6. SEX: M
8. BIRTH STATE/FOREIGN COUNTRY: CA
10. SOCIAL SECURITY NUMBER: [redacted]
11. EVER IN U.S. ARMED FORCES? [X] YES [ ] NO [ ] UNK
12. MARITAL STATUS/RDP* (at Time of Death): MARRIED
7. DATE OF DEATH mm/dd/yyyy: 03/24/2017
8. HOUR (24 Hours): 1437
13. EDUCATION – Highest Level/Degree (see worksheet on back): BACHELOR
14/15. WAS DECEDENT HISPANIC/LATINO(A)/SPANISH? (If yes, see worksheet on back) [ ] YES [X] NO
16. DECEDENT'S RACE – Up to 3 races may be listed (see worksheet on back): CAUCASIAN
17. USUAL OCCUPATION – Type of work for most of life. DO NOT USE RETIRED: SELF EMPLOYED
18. KIND OF BUSINESS OR INDUSTRY (e.g., grocery store, road construction, employment agency, etc.): BUSINESS OWNER
19. YEARS IN OCCUPATION: 40

USUAL RESIDENCE

20. DECEDENT'S RESIDENCE (Street and number, or location): 993 DEBRA DRIVE
21. CITY: SANTA BARBARA
22. COUNTY/PROVINCE: SANTA BARBARA
23. ZIP CODE: 93110
24. YEARS IN COUNTY: 40
25. STATE/FOREIGN COUNTRY: CA

INFORMANT

26. INFORMANT'S NAME, RELATIONSHIP: HELEN ROBERTS, WIFE
27. INFORMANT'S MAILING ADDRESS (Street and number, or rural route number, city or town, state and zip): 993 DEBRA DRIVE, SANTA BARBARA, CA 93110

SPOUSE/RDP AND PARENT INFORMATION

28. NAME OF SURVIVING SPOUSE/RDP* - FIRST: HELEN
29. MIDDLE: JEAN
30. LAST (Birth Name): CHEATHAM
31. NAME OF FATHER/PARENT - FIRST: REMUS
32. MIDDLE: ESTHER
33. LAST: ROBERTS
34. BIRTH STATE: AR
35. NAME OF MOTHER/PARENT - FIRST: WILMOTH
36. MIDDLE: -
37. LAST (Birth Name): ACUFF
38. BIRTH STATE: AR

FUNERAL DIRECTOR/ LOCAL REGISTRAR

39. DISPOSITION DATE mm/dd/yyyy: 03/28/2017
40. PLACE OF FINAL DISPOSITION: AT SEA OFF COAST OF SANTA BARBARA COUNTY
41. TYPE OF DISPOSITION(S): CR/SEA
42. SIGNATURE OF EMBALMER: NOT EMBALMED
43. LICENSE NUMBER: --
44. NAME OF FUNERAL ESTABLISHMENT: SIMPLY REMEMBERED CREMATION CARE
45. LICENSE NUMBER: FD2113
46. SIGNATURE OF LOCAL REGISTRAR: CHARITY DEAN, MD, MPH
47. DATE mm/dd/yyyy: 03/27/2017

PLACE OF DEATH

101. PLACE OF DEATH: SANTA BARBARA COTTAGE HOSPITAL
102. IF HOSPITAL, SPECIFY ONE: [X] IP [ ] ER/OP [ ] DOA
103. IF OTHER THAN HOSPITAL, SPECIFY ONE: [ ] Hospice [ ] Nursing Home/LTC [ ] Decedent's Home [ ] Other
104. COUNTY: SANTA BARBARA
105. FACILITY ADDRESS OR LOCATION WHERE FOUND (Street and number, or location): 400 WEST PUEBLO STREET
106. CITY: SANTA BARBARA

CAUSE OF DEATH

107. CAUSE OF DEATH — Enter the chain of events — diseases, injuries, or complications — that directly caused death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE.

IMMEDIATE CAUSE (Final disease or condition resulting in death) → (a) ATHEROSCLEROTIC CARDIOVASCULAR DISEASE

Time Interval Between Onset and Death: (d) YRS

Sequentially list conditions, if any, leading to cause on Line A. Enter UNDERLYING CAUSE (disease or injury that initiated the events resulting in death) LAST:
(b)
(c)
(d)

108. DEATH REPORTED TO CORONER? [X] YES [ ] NO — 17-4278
109. BIOPSY PERFORMED? [ ] YES [X] NO
110. AUTOPSY PERFORMED? [ ] YES [X] NO
111. USED IN DETERMINING CAUSE? [ ] YES [ ] NO

112. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN 107: ELEVATED CHOLESTEROL, MILD HIGH BLOOD PRESSURE

113. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? (If yes, list type of operation and date.): NO

110A. IF FEMALE, PREGNANT IN LAST YEAR? [ ] YES [ ] NO [ ] UNK

PHYSICIAN'S CERTIFICATION

114. I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED.
Decedent Attended Since (a) mm/dd/yyyy
Decedent Last Seen Alive (b) mm/dd/yyyy
115. SIGNATURE AND TITLE OF CERTIFIER:
116. LICENSE NUMBER:
117. DATE mm/dd/yyyy:
118. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP CODE:

CORONER'S USE ONLY

119. I CERTIFY THAT IN MY OPINION DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED.
MANNER OF DEATH: [X] Natural [ ] Accident [ ] Homicide [ ] Suicide [ ] Pending Investigation [ ] Could not be determined
120. INJURED AT WORK? [ ] YES [ ] NO [ ] UNK
121. INJURY DATE mm/dd/yyyy:
122. HOUR (24 Hours):
123. PLACE OF INJURY (e.g., home, construction site, wooded area, etc.):
124. DESCRIBE HOW INJURY OCCURRED (Events which resulted in injury):
125. LOCATION OF INJURY (Street and number, or location, and city, and zip):
126. SIGNATURE OF CORONER / DEPUTY CORONER: CHAD W BIEDINGER
127. DATE mm/dd/yyyy: 03/27/2017
128. TYPE NAME, TITLE OF CORONER / DEPUTY CORONER: CHAD W BIEDINGER, DEP CORONER

STATE REGISTRAR	A	B	C	D	E		FAX AUTH.#	CENSUS TRACT
						010001003519596		

CASTABARD1

CERTIFIED COPY OF VITAL RECORD
STATE OF CALIFORNIA, COUNTY OF SANTA BARBARA

000480419

This is a true and exact reproduction of the document officially registered and placed on file in the office of the Registrar, Public Health Department, County of Santa Barbara, California.

DATE ISSUED MAR 28 2017

C Dean MD
CHARITY DEAN, MD
HEALTH OFFICER/PUBLIC HEALTH DEPARTMENT
COUNTY OF SANTA BARBARA, CALIFORNIA

This copy not valid unless prepared on engraved border displaying the date, seal and signature of the Health Officer.

THE GREAT SEAL OF THE STATE OF CALIFORNIA — EUREKA

COUNTY OF SANTA BARBARA CALIFORNIA

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

ED
2002
..., ID
RECORDER

150677

GRANT DEED

Instrument # 150677
DRIGGS, TETON, IDAHO
2002-10-09 01:30:11 No. of Pages: 1
Recorded for : RIGBY, THATCHER, ANDRUS, RIGBY,
NOLAN G. BOYLE Fee: 3.00
Ex-Officio Recorder Deputy
Index to: DEED GRANT

FOR VALUE RECEIVED, **HELEN JEAN ROBERTS**, of 993 Debra Drive, Santa Barbara, CA 93110, a married woman, as her sole and separate property, hereinafter called "Grantor" and Grantor's husband, **James G. Roberts**, for the purpose of conveying any doubtful community interest, do hereby grant and convey, to **James G. Roberts and Helen J. Roberts**, of 993 Debra Drive, Santa Barbara, CA 93110 **as Trustees of the JAMES G. ROBERTS FAMILY TRUST dated December 10, 1997**, the following described real property in Teton County, Idaho, to-wit:

The Northeast Quarter of Section 31, Township 7 North, Range 45 East, Boise Meridian, Teton County, Idaho.
(Also known as parcel number RP 07N45E310010 A)

TOGETHER WITH any and all other water rights (including but not limited to that portion of Idaho Department of Water Resource license 22-7189 which has as a portion of its place of use the above described premises) and improvements and appurtenances thereto; rents, issues and profits thereof; and reversions and remainders.

DATED This 1st day of October, 2002.

Helen Jean Roberts
Helen Jean Roberts

James G. Roberts

Acknowledgment

STATE OF CALIFORNIA,)
ss.
County of Santa Barbara)

On this 1st day of October, 2002, before me, Michelle M. Cook the undersigned, a Notary Public in and for said State, personally appeared **Helen Jean Roberts and James G. Roberts**, known to me to be the persons whose names are subscribed to the within instrument and acknowledged to me that they executed the same.

MICHELLE M. COOK
COMM. #1300736
NOTARY PUBLIC-CALIFORNIA
SANTA BARBARA COUNTY
My Comm. Expires April 13, 2005

Michelle M. Cook
Notary Public for California
Residing at: 5340 Hollister Ave. S.B. CA. 93111
My Commission Expires: April 13, 2005

F:\WP6\SB\COCHRANE.GD4

150677

Unofficial Copy

RECEIVED
SEP 25 2002
TETON CO
CLERK RECORDER

150353

Instrument # 150353
DRIGGS, TETON, IDAHO
2002-09-25 09:27:19 No. of Pages: 1
Recorded for : RIGBY, THATCHER, ANDRUS
NOLAN G. BOYLE Fee: 3.00
Ex-Officio Recorder Deputy
Index to: DEED, GRANT

GRANT DEED

FOR VALUE RECEIVED, **NANCY SHIPCOTT**, of 13552 Whembly Drive, Santa Ana, CA 92705, as Successor Trustee under the FIRST RESTATEMENT OF THE COCHRANE FAMILY LIVING TRUST, dated April 4, 1991, hereinafter called "Grantor", does hereby grant and convey, to **HELEN JEAN ROBERTS**, of 993 Debra Drive, Santa Barbara, CA 93110, a married woman, as her sole and separate property, for her sole and separate use, the following described real property in Teton County, Idaho, to-wit:

The Northeast Quarter of Section 31, Township 7 North, Range 45 East, Boise Meridian, Teton County, Idaho.
(Also known as parcel number RP 07N45E310010 A)

TOGETHER WITH any and all other water rights (including but not limited to that portion of Idaho Department of Water Resource license 22-7189 which has as a portion of its place of use the above described premises) and improvements and appurtenances thereto; rents, issues and profits thereof; and reversions and remainders.

DATED This 16 day of September, 2002.

Nancy Shipcott
Nancy Shipcott,
Successor Trustee under the First Restatement of the Cochrane Family Living Trust

Acknowledgment by Trustee

STATE OF CALIFORNIA,)
ss.
County of ORANGE.)

On this 16 of September, 2002, before me, the undersigned, a Notary Public in and for said State, personally appeared **Nancy Shipcott**, known to me to be person whose name is subscribed to the within instrument as the Successor Trustee under the First Restatement of the Cochrane Family Living Trust, dated April 4, 1991, and acknowledged to me that she executed the same as such Successor Trustee.

Patricia Peterson
Notary Public for California
Residing at: Tustin Ca
My Commission expires: 4-8-2004

F:\WP6\SB\COCHRA

Unofficial Copy

RECORDING REQUESTED BY:
WILLIAM & HELEN E. COCHRANE

WHEN RECORDED MAIL TO:

WILLIAM COCHRANE
HELEN E. COCHRANE
2400 MARIPOSA WEST, #1-D
LAGUNA HILLS, CA. 92683

MAIL TAX STATEMENTS TO:

WILLIAM & HELEN E. COCHRANE
2400 MARIPOSA WEST, #1-D
LAGUNA HILLS, CA. 92683

FILED
AT THE REQUEST OF
William Cochrane
AT 30 MINUTES PAST 2 p M
DATE May 24, 1991
Asa J. Drake
CLERK OF RECORDER
BY Nora Hill
DEPUTY

MAY 24 1991
TETON Co. Id.
Clerk Recorder
107991

FILMED ✓
INDEXED ✓
PLATTED ✓

(FOR RECORDER'S USE ONLY)

TRUST TRANSFER DEED

(Excluded from Reappraisal Under Proposition 13)

The Undersigned Grantor(s) declare under Penalty of Perjury that the following is true and correct:

THERE IS NO CONSIDERATION FOR THIS TRANSFER.
Documentary transfer tax is **NONE.**
There is no Documentary transfer tax due because this conveyance transfers Grantors' interest into their Revocable Living Trust (R & T 11911).
This is a Transfer To a Revocable Trust for the Benefit of the Grantors under Sec. 62 of the Revenue and Taxation Code, and for that reason is excluded from reappraisal and reassessment.

GRANTORS, WILLIAM COCHRANE and HELEN E. COCHRANE, husband and wife, whose address is located at 2400 MARIPOSA WEST, #1-D, LAGUNA HILLS, CA. 92683, as joint tenants **HEREBY REMISE, RELEASE AND FOREVER GRANTS TO** WILLIAM COCHRANE and HELEN E. COCHRANE, as Trustees of the COCHRANE FAMILY TRUST, dated APRIL 4 , 1991, the following described real property in the County of TETON, in the State of IDAHO:

THE NORTHEAST QUARTER (NE 1/4), SECTION THIRTY-ONE (31) TOWNSHIP SEVEN NORTH, RANGE FORTY-FIVE E.B.M.

ASSESSOR'S PARCEL NUMBER: RP07N45E310010A

Dated April 4, 1991

William Cochrane
WILLIAM COCHRANE

Helen E. Cochrane
HELEN E. COCHRANE

State of California
County of Orange
On this, the 4th day of April, 1991,
before me, Keith C. Pepper,
the undersigned Notary Public, personally appeared
WILLIAM COCHRANE and HELEN E. COCHRANE,
proved to me on the basis of satisfactory evidence
to be the persons whose names are subscribed to the
within instrument, and acknowledged that they executed it.
WITNESS my hand and official Seal.

Keith C. Pepper
Notary's Signature

OFFICIAL SEAL
KEITH C. PEPPER
NOTARY PUBLIC-CALIFORNIA
ORANGE COUNTY
MY COMM. EXP. AUG. 26, 1994

(This area for Official Notarial Seal)

MAIL TAX STATEMENTS AS DIRECTED ABOVE

Unofficial Copy

IDAHO DEPARTMENT OF
WATER RESOURCES

Eastern Region • 900 N Skyline Drive, Suite A • Idaho Falls, ID 83402-1718
Phone: 208-525-7161 • Fax: 208-525-7177 • Email: easterninfo@idwr.idaho.gov • Web: idwr.idaho.gov

Governor Brad Little

Director Mathew Weaver

October 06, 2025

ROBERTS SURVIVORS TRUST
993 DEBRA DR
SANTA BARBARA CA 93110-1226

Re: Change in Water Right Ownership: 22-7189 (Split into 22-7189 and 22-14699)

Dear Water Right Holder(s):

The Department of Water Resources (Department) acknowledges the receipt of correspondence changing ownership of a portion of the above referenced water right(s) to you. The Department has modified its records based on the information received and has enclosed a computer-generated report for you.

Your portion of each water right(s) has a specified point of diversion, nature of use and place of use. If you plan to change the authorized point of diversion, nature of use, or place of use, including adding a new point of diversion, you must file an Application for Transfer of Water Right. If you do not plan to change any elements of your water right, then no further action is required at this time.

The portion of the water right retained by the original right holder retains the original water right number. The Department is sending the original right holder a copy of this letter and a computer-generated report showing the changes to the original water right.

Updating the ownership record for a water right does not reconfirm the validity of the right. When processing a Notice of Change in Water Right Ownership, the Department does not review the history of water use to determine if the right has been forfeited or deliberately abandoned through five years or more of non-use. To read more about water right forfeiture, including how to protect a water right from forfeiture, please see Idaho Code §§ 42-222 and 42-223.

Please note, water right owners are required to report any change of water right ownership and any change of mailing address to the Department within 120 days of the change. Reporting forms are available from any office of the Department, or from the Department's website.

If you have any questions concerning the enclosed information, please contact me at 208-497-3787.

Sincerely,

Jonie Baily
Technical Records Specialist 1

Enclosure(s)

cc: DALE R ROBSON