

APN 1220-09-410-007



When recorded return to:

Douglas County
PO Box 218
Minden NV 89423

KAREN ELLISON, RECORDER

E02

WATER RIGHTS QUITCLAIM DEED

THIS INDENTURE is made and entered into this 22 day of July 2015 between **Mike M Rippet and Susan M Rippet, Trustees of the Rippet Family Trust dated July 13, 2009**, hereinafter referred to as "**Grantor**", and **Douglas County**, a political subdivision of the State of Nevada, hereinafter referred to as "**Grantee**".

WITNESSETH:

That said **Grantor**, for and in consideration of the sum of Ten Dollars (\$10.00), lawful money of the United States of America, to them in hand paid by the **Grantee** and for other good and valuable consideration, the receipt of which is hereby acknowledged, have remised, released and forever quitclaimed, and by these presents to remise, release and forever quitclaim unto the Grantees and to their heirs, successors and assigns forever, all of their right, title and interest in and to the following water rights which are on file in the Nevada State Engineer's Office:

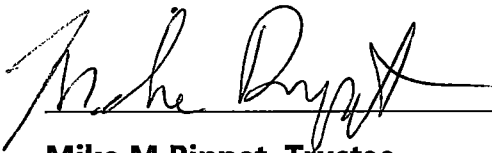
A portion of Claim 279-000-00-8, being 0.28 irrigated acres.

TOGETHER WITH, all and singular, the tenements, hereditaments and appurtenances thereunto belonging or in anywise appertaining, and the reversion and reversions, remainder and remainders, rents, issues and profits thereof.

TO HAVE AND TO HOLD, all and singular, the said water rights with the appurtenances, unto the said **Grantee** and to their successor's, heirs and assigns forever.

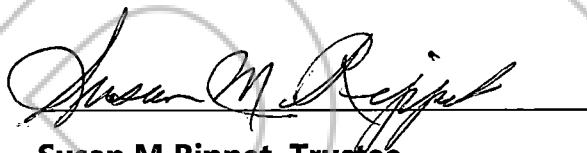
IN WITNESS WHEREOF, the **Grantor** has hereunto executed this Water Rights Quitclaim Deed the day and year first above written

Grantor:



Mike M Rippet, Trustee

Rippet Family Trust dated July 13, 2009

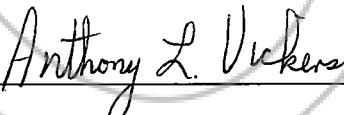


Susan M Rippet, Trustee

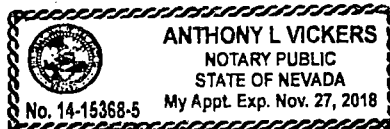
Rippet Family Trust dated July 13, 2009

State of Nevada)
) ss.
County of Douglas)

On this 22nd day of JULY, 2015, personally appeared before me, a Notary Public, **Mike M Rippet and Susan M Rippet, Trustees of the Rippet Family Trust dated July 13, 2009**, personally known to me to be the persons whose name is subscribed to the attached instrument who acknowledged that they executed the foregoing instrument.



Notary Public



STATE OF NEVADA DECLARATION OF VALUE

FOR RECORDERS OPTIONAL USE ONLY

Document/Instrument#: _____

Book: _____ Page: _____

Date of Recording: _____

Notes: _____

1. Assessor Parcel Number (s)

- (a) 1220-09-410-007
- (b) _____
- (c) _____
- (d) _____

2. Type of Property:

- a) Vacant Land
- b) Single Fam Res.
- c) Condo/Twnhse
- d) 2-4 Plex
- e) Apt. Bldg.
- f) Comm'l/Ind'l
- g) Agricultural
- h) Mobile Home
- i) Other WATER RIGHTS

3. Total Value/Sales Price of Property:

Deed in Lieu of Foreclosure Only (value of property) \$ _____

Transfer Tax Value: \$ _____

Real Property Transfer Tax Due: \$ _____

4. If Exemption Claimed:

a. Transfer Tax Exemption, per NRS 375.090, Section: #2

b. Explain Reason for Exemption: TO DOUGLAS COUNTY

5. Partial Interest: Percentage being transferred: _____ %

The undersigned declares and acknowledges, under penalty of perjury, pursuant to NRS 375.060 and NRS 375.110, that the information provided is correct to the best of their information and belief, and can be supported by documentation if called upon to substantiate the information provided herein. Furthermore, the disallowance of any claimed exemption, or other determination of additional tax due, may result in a penalty of 10% of the tax due plus interest at 1 % per month.

Pursuant to NRS 375.030, the Buyer and Seller shall be jointly and severally liable for any additional amount owed.

Signature [Signature] Capacity AGENT

Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION

(REQUIRED)

Print Name: MILKE & SUSAN RIPPET

Address: 1225 SIERRA VISTA DR

City: GARDNERVILLE

State: NV Zip: 89460

BUYER (GRANTEE) INFORMATION

(REQUIRED)

Print Name: DOUGLAS COUNTY

Address: PO BOX 218

City: MINDEN

State: NV Zip: 89423

COMPANY/PERSON REQUESTING RECORDING (REQUIRED IF NOT THE SELLER OR BUYER)

Print Name: _____ Escrow # _____

Address: _____

City: _____ State: _____ Zip: _____