DOUGLAS COUNTY, NV RPTT:\$171.60 Rec:\$40.00

2023-997475

Total:\$211.60

06/13/2023 12:20 PM

RESOURCE CONCEPTS INC

SHAWNYNE GARREN, RECORDER

Pgs=4

00169158202309974750040046

Water Rights Only When recorded return to: Mail Tax Statement to: Joaquin Bear, LLC P.O. Box 1030 Aptos, CA 95001

WATER RIGHTS DEED

THIS WATER RIGHTS DEED, made and entered into this 30 day of May, 2023, between Linda L. Bartlett (Grantor), and Joaquin Bear, LLC, a California limited liability company (Grantee):

WITNESSETH:

That said Grantor, for good and valuable consideration, the receipt whereof is hereby acknowledged, does hereby grant, bargain, sell, and convey to Grantee, and to its successors, heirs and assigns forever, all right, title, and interest in and to the following described water right, in the County of Douglas, State of Nevada, more particularly described as follows:

A portion of groundwater **Permit No. 68740**, being **0.0326 c.f.s.** and **11.58 acre feet annually**, said water rights being appurtenant to 2.895 acres within the place of use shown on the MAP TO ACCOMPANY APPLICATION TO CHANGE THE POINT OF DIVERSION, PLACE OF USE, & MANNER OF USE UNDER PERMITS 43113 & 61927 FOR IRRIGATION AND DOMESTIC PURPOSES BY JOSEPH S. LODATO..., filed April 23, 2002, in the office of the State Engineer, Nevada Division of Water Resources.

TO HAVE AND TO HOLD, all and singular, the said water rights described above, together with the appurtenances, unto the said Grantee, and its successors, heirs and assigns forever.

IN WITNESS WHEREOF, the Grantor has executed this Water Rights Deed the day and year first hereinabove written.

GRANTOR: Linda L. Bartlett	
Sinda L Bartlett Linda L. Bartlett	
STATE OF <u>California</u>) so COUNTY OF <u>Santa (NZ</u>)	
On this 30 day of May me, who is personally known (or provacknowledged that she signed it.	ed) to me to be the signer of the above instrument, and she See attached
Notary Public	loose certificate

CALIFORNIA ALL- PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

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 Santa Cruz	}
	name(s)(s)are subscribed to the within in he/she/they executed the same in his/he	ectory evidence to be the person(s) whose instrument and acknowledged to me that eightheir authorized capacity(ies), and that by ent the person(s), or the entity upon behalf of
	the foregoing paragraph is true and corr WITNESS my hand and official seal.	under the laws of the State of California that rect. SHANDRA HURT COMM. #2412174 Notary Public California Santa Cruz County My Comm. Expires Aug. 30, 2026
	ADDITIONAL OPTIONAL INFORMATION DESCRIPTION OF THE ATTACHED DOCUMENT Title or description of attached document continued) [Title or description of attached document continued] Number of Pages 2 Document Date 5/30/2023	if needed, should be completed and attached to the document. Acknowledgments from other states may be completed for documents being sent to that state so long as the wording does not require the California notary to violate California notary law. State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment. Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed. The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public). Print the name(s) of document signer(s) who personally appear at the time of
\	CAPACITY CLAIMED BY THE SIGNER Individual (s) Corporate Officer (Title) Partner(s) Attorney-in-Fact Trustee(s)	 Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/shc/they, is /are) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording. The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form. Signature of the notary public must match the signature on file with the office of the county clerk. Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document. Indicate title or type of attached document, number of pages and date.

Indicate the capacity claimed by the signer. If the claimed capacity is a

corporate officer, indicate the title (i.e. CEO, CFO, Secretary).

• Securely attach this document to the signed document with a staple.

... v Notary Classes com 800-810-9865

Other

STATE OF NEVADA DECLARATION OF VALUE

	FOR RECORDERS OPTIONAL USE ONLY			
1. Assessor Parcel Number (s)	Document/Instruments #:			
TY A D' LA O L. AT ADM	Book: Page:			
1-)	Date of Recording:			
c)	Notes:			
d)				
2. Type of Property:				
a) Vacant Land b) Single Fa	m Res.			
c) Condo/Twnhse d) 2-4 Plex				
e) Apt. Bldg. f) Comm'l/lr	nd'l			
g) Agricultural h) Mobile Ho	ome			
i) ✓ Other – Water Rights				
3. Total Value/Sales Price of Property:	\$ 44,000.00			
Deed in Lieu of Foreclosure Only (value of property				
Transfer Tax Value:	\$ 44,000.00			
Real Property Transfer Tax Due:	\$ 171.60			
4. If Exemption Claimed:				
a. Transfer Tax Exemption, per NRS 375.090, Se	ection:			
b. Explain Reason for Exemption:	COLIOTI.			
S. Explain Readon for Exemption,				
5. Partial Interest: Percentage being transferred	100% of 11.58 ac. ft. under Water Right Permit 68740			
The undersigned declares and acknowledges, under and NRS 375.110, that the information provided is declined, and can be supported by documentation if carbonided herein. Furthermore, the disallowance of a dditional tax due, may result in a penalty of 10%	correct to the best of their information and alled upon to substantiate the information any claimed exemption, or other determination			
Burnuant to NRS 275 020 the Burner and Saller shall	Il he jointly and saverally liable for any			
Pursuant to NRS 375.030, the Buyer and Seller shall be jointly and severally liable for any additional amount owed.				
Signature	Capacity Grantor			
Signature Landlem, MANAGER	Capacity Grantee			
SELLER (GRANTOR) INFORMATION	BUYER (GRANTEE) INFORMATION			
(REQUIRED)	(REQUIRED)			
Print Name: Linda L. Bartlett	Print Name: Joaquin Bear, LLC			
Address: P.O. Box 318	Address: P.O. Box 1030			
City: Wellington	City: Aptos			
State: NV Zip: 89444	State: CA Zip: 95001			
COMPANYING PROCESSION PROCESSION	10			
COMPANY/PERSON REQUESTING RECORDIN	<u> </u>			
(REQUIRED IF NOT THE SELLER OR BUYER)	Escrow#			
Print Name:	E3CIUW #			
Address:	State: 7in:			
City:	State: Zip:			