

Run Date: 02/03/2017

AZ DEPARTMENT OF WATER RESOURCES

WELL REGISTRY REPORT - WELLS55

Location D 21.0 25.0 12 D C C Well Reg.No 55 - 619089 AMA DOUGLAS INA

Registered Name LUZ DIVINA ANDRAUX,
AS TRUSTEE OF THE SHALOM TRUST
1440 WEST AJO WAY
TUCSON AZ 85713

File Type REGISTERED WELL
Application/Issue Date 06/10/1982

Owner OWNER
Driller No. 0
Driller Name
Driller Phone
County COCHISE
Parcel No. 111-45-003G
Intended Capacity GPM 0.00

Well Type NON-EXEMPT
SubBasin DOUGLAS
Watershed WHITE WATER DRAW
Registered Water Uses IRRIGATION
Registered Well Uses WATER PRODUCTION
Discharge Method NONE
Power NO POWER CODE LISTED

Well Depth 640.00
Pump Cap. 1,736.00
Draw Down 0.00

Case Diam 16.00
Case Depth 640.00
Water Level 73.00
Acres Irrig 160.00

Tested Cap 1,736.00
CRT
Log
Finish STEEL - PERFORATED OR SLOTTED
CASING

Contamination Site: NO - NOT IN ANY REMEDIAL ACTION SITE

Tribe: Not in a tribal zone

Comments 1/24/2014- Updated parcel information based on change of well information form. kc

Places Of Use

D 21 0 25 0 12

Current Action

3/24/2016 860 CHANGE OF WELL OWNERSHIP
Action Comment: sym

Action History

1/24/2014 880 CHANGE IN REMEDIAL ACTION SITE CODE
Action Comment: OLD WQARF code: null
1/24/2014 860 CHANGE OF WELL OWNERSHIP
Action Comment: kc
5/29/2003 861 CHANGE OF WELL OWNERSHIP - CONVEYANCE
Action Comment: SW
4/1/1966 755 WELL CONSTRUCTION COMPLETED
Action Comment:



Arizona Department of Water Resources
Water Management Support Section
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • www.azwater.gov

Request to Change Well Information

- ❖ Review instructions prior to completing form in back or blue ink.
- ❖ You must include with your Notice:
 - check or money order for any required fee(s)
- ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104

** PLEASE PRINT CLEARLY **

FILE NUMBER

D(21-25)12 DCC

WELL REGISTRATION NUMBER

55-619089

SECTION 1. REGISTRY INFORMATION

Well Owner		Location of Well					
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Cowan-NI, LLC		WELL LOCATION ADDRESS (IF ANY) VACANT LAND, Mc Neal, AZ 85617					
MAILING ADDRESS P.O. BOX 190 4990 Corrales		TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE
CITY / STATE / ZIP CODE Corrales, NM 87048		21 S	25 E	12	SE ¼	SW ¼	SW ¼
CONTACT PERSON NAME AND TITLE		LATITUDE		LONGITUDE			
		Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
TELEPHONE NUMBER		FAX		METHOD OF LATITUDE/LONGITUDE (CHECK ONE)			
		(505) 897-9077		<input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Hand-Held			
				<input type="checkbox"/> *GPS: Survey-Grade			
		*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (CHECK ONE)					
		<input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):					
		COUNTY ASSESSOR'S PARCEL ID NUMBER			COUNTY WHERE WELL IS LOCATED		
		BOOK	MAP	PARCEL			
		111	45	003G	Cochise		

Type of Request (CHECK ONE)

- ☐ Change of Well Drilling Contractor (Fill out Section 2) ☒ Change of Well Ownership (Fill out Section 3) ☐ Change of Well Information (location, use, etc.) (Fill out Section 4)

SECTION 2. REQUEST TO CHANGE WELL DRILLING CONTRACTOR

FEE \$120 per Well

- ♦ If drilling or abandoning a well, the Department must receive this request and issue authorization to the new drilling firm prior to the commencement of well drilling or abandonment.

Current Well Drilling Contractor		New Well Drilling Contractor	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL		FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL	
DWR LICENSE NUMBER		DWR LICENSE NUMBER	ROC LICENSE CATEGORY
TELEPHONE NUMBER	FAX	TELEPHONE NUMBER	FAX

SECTION 3. STATEMENT OF CHANGE OF WELL OWNERSHIP

FEE \$30 per Well

Previous Well Owner		New Well Owner	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Cowan-NI, LLC		FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Luz Divina Andraux, as Trustee of The Shalom Trust	
MAILING ADDRESS P.O. BOX 190 4990 Corrales		MAILING ADDRESS 1440 West Ajo Way	
CITY / STATE / ZIP CODE Corrales, NM 87048		CITY / STATE / ZIP CODE Tucson, AZ 85713	
CONTACT PERSON NAME AND TITLE		CONTACT PERSON NAME AND TITLE	
TELEPHONE NUMBER	FAX	TELEPHONE NUMBER	FAX
	(505) 897-9077		(520) 807-9656

SECTION 4. CHANGE OF WELL INFORMATION (No Fee Required)

NOTE: Applies only to wells that have already been drilled. For proposed wells, an amended Notice of Intent to Drill a Well must be filed.
EXPLAIN

SECTION 5. OPTIONAL BY PROPERTY OWNER AND WELL OWNER ONLY

- ☐ By checking this box, I hereby provide ADWR permission to enter the property for the purpose of taking water level measurements at this well. (See instructions.)

SECTION 6. WELL OWNER SIGNATURE

I HEREBY CERTIFY that the above statements are true to the best of my knowledge and belief.

TYPE OR PRINT NAME AND TITLE
Luz Divina Andraux, as Trustee

SIGNATURE OF WELL OWNER

DATE

2016-03356
Page 1 of 5
Requested By: Pioneer Title Agency
Christine Rhodes - Recorder
Cochise County, AZ
03-01-2016 02:25 PM Recording Fee \$15.00

at the request of Pioneer Title Agency, Inc.
When recorded mail to
Luz Divina Andraux
1440 West Ajo Way
Tucson, AZ 85713

70900210-KLB

SPACE ABOVE THIS LINE FOR RECORDER'S USE

Tax Parcel No.: 111-45-003G-5; 111-45-003E-7; 111-45-018C, a portion of

WARRANTY DEED

For the consideration of Ten Dollars, and other valuable consideration, I or we,
Cowan-NI, LLC, a New Mexico Limited Liability Company, an undivided 50% interest (for the benefit of
Florence Cowan Holly) and Cowan-NI, LLC, a New Mexico Limited Liability Company, an undivided 50%
interest (for the benefit of Marguerite Cowan); COWAN-NI, LLC, a New Mexico Limited Liability
Company

do/does hereby convey to

Luz Divina Andraux, as Trustee of The Shalom Trust, dated April 3, 2014

the following real property situated in Cochise County, Arizona:

See Exhibit A attached hereto and made a part hereof.

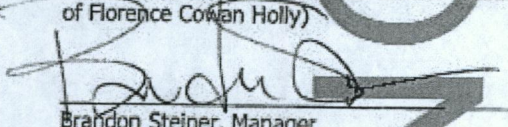
Pursuant to ARS 33-404, the names and addresses of the beneficiaries of THE SHALOM TRUST are as
disclosed in Exhibit B attached hereto and made a part hereof.

SUBJECT TO: Current taxes and other assessments, reservations in patents and all easements, rights of
way, encumbrances, liens, covenants, conditions, restrictions, obligations and liabilities as may appear
of record.

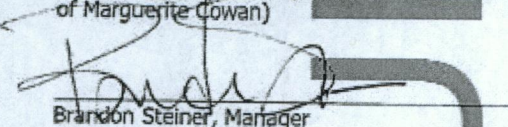
The Grantor warrants the title against all persons whomsoever.

DATED: February 19, 2016

COWAN-NI, LLC, a New Mexico Limited Liability Company, an undivided 50% interest (for the benefit
of Florence Cowan Holly)


Brandon Steiner, Manager

COWAN-NI, LLC, a New Mexico Limited Liability Company, an undivided 50% interest (for the benefit
of Marguerite Cowan)


Brandon Steiner, Manager

2016-03356 03-01-2016 Page 2 of 5

COWAN-NI, LLC, a New Mexico Limited Liability Company


Brandon Steiner, Manager

State of New Mexico }
 } ss.
County of Bernalillo }

The foregoing instrument was acknowledged before me this 19th day of February, 2016, by Brandon Steiner, Manager of COWAN-NI, LLC, a New Mexico Limited Liability Company, and as Manager of COWAN-NI, LLC, a New Mexico Limited Liability Company, an undivided 50% interest (for the benefit of Florence Cowan Holly), and as Manager of COWAN-NI, LLC, a New Mexico Limited Liability Company, an undivided 50% interest (for the benefit of Marguerite Cowan).


NOTARY PUBLIC
My commission expires:



2016-03356 03-01-2016 Page 3 of 5

Exhibit A

PARCEL I:

The East half of the West half; and
The East half of Section 10;
All of Section 11;
Government Lots 2, 3 and 4;
The West half of the East half; and
The West half of Section 12;
All in Township 21 South, Range 25 East of the Gila and Salt River Base and Meridian, Cochise County, Arizona;

EXCEPT all coal and other minerals as reserved in Patent from United States of America, as to that portion lying within Sections 10 and 11.

PARCEL II:

The West half of the West half of Section 10, Township 21 South, Range 25 East of the Gila and Salt River Base and Meridian, Cochise County, Arizona;

EXCEPT all coal and other minerals as reserved in Patent from United States of America.

PARCEL III:

Lots 1, 2, 3 and 4; and
The West half of the East half; and
The East half of the West half of Section 13, Township 21 South, Range 25 East of the Gila and Salt River Base and Meridian, Cochise County, Arizona;

EXCEPT any portion lying within the following described Parcel:

BEGINNING at the Southeast corner of Section 13, said point being monumented with an aluminum cap;

thence South $89^{\circ}35'07''$ West coincident with the South line of Section 13, a distance of 1,790.00 feet;

thence North $00^{\circ}06'12''$ East, a distance of 2,435.00 feet;

thence North $89^{\circ}35'07''$ East, a distance of 1,790.00 feet to a point on the East line of Section 13;

thence South $00^{\circ}06'12''$ West coincident with the East line of Section 13, a distance of 2,435.00 feet to the Southeast corner of Section 13 and the POINT OF BEGINNING.

PARCEL IV:

An easement for ingress, egress and utilities as created in Document No. 2015-17279 over the following described property:

Warranty Deed - Escrow No. 70900210

2016-03356 03-01-2016 Page 4 of 5

A portion of Section 13, Township 21 South, Range 25 East of the Gila and Salt River Base and Meridian, Cochise County, Arizona, more particularly described as follows:

BEGINNING at the Southeast corner of Section 13, said point being monumented with an aluminum cap;

thence South 89°35'07" West coincident with the South line of Section 13, a distance of 1,790.00 feet;

thence North 00°06'12" East, a distance of 2,435.00 feet;

thence North 89°35'07" East, a distance of 1,790.00 feet to a point on the East line of Section 13;

thence South 00°06'12" West coincident with the East line of Section 13, a distance of 2,435.00 feet to the Southeast corner of Section 13 and the POINT OF BEGINNING.

PARCEL V:

An easement for ingress, egress and utilities over the West 60.00 feet of Section 15, Township 21 South, Range 25 East of the Gila and Salt River Base and Meridian, Cochise County, Arizona.

UNOFFICIAL DOCUMENT

Warranty Deed - Escrow No. 70900210

AFFIDAVIT OF PROPERTY VALUE**1. ASSESSOR'S PARCEL IDENTIFICATION NUMBER(S)**

Primary Parcel: 111-45-003G-5
 BOOK MAP PARCEL SPLIT

Does this sale include any parcels that are being split / divided?

Check one: Yes ☒ No ☐

How many parcels, other than the Primary Parcel, are included in this sale? 2

Please list the additional parcels below (attach list if necessary):

(1) 111-45-018C, a portion of (2) 111-45-003E-7

(3) _____ (4) _____

2. SELLER'S NAME AND ADDRESS:

COWAN-NE, LLC, a New Mexico Limited Liability Company
P.O. BOX 190, 4990 Corrales
Corrales, NM 87048

3. (a) BUYER'S NAME AND ADDRESS:

THE SHALOM TRUST
1440 West Ajo Way
Tucson, AZ 85713

(b) Are the Buyer and Seller related? Yes ☐ No ☒
 If Yes, state relationship: _____

4. ADDRESS OF PROPERTY:

VACANT LAND
Mc Neal, AZ 85617

5. (a) MAIL TAX BILL TO: (Taxes due even if no bill received)

Luz Divina Andraux, as Trustee of THE SHALOM TRUST
1440 West Ajo Way
Tucson, AZ 85713

(b) Next tax payment due October 1, 2016

6. PROPERTY TYPE (for Primary Parcel): NOTE: Check Only One Box

- a ☒ Vacant Land f ☐ Commercial or Industrial Use
 b ☐ Single Family Residence g ☐ Agricultural
 c ☐ Condo or Townhouse h ☐ Mobile or Manufactured Home
 d ☐ 2-4 Plex i ☐ Other Use, Specify: _____
 e ☐ Apartment Building

7. RESIDENTIAL BUYER'S USE: If you checked b, c, d and h in Item 6 above, please check one of the following

- a ☐ To be used as a primary residence
 b ☐ To be rented to someone other than a "qualified family member"
 c ☐ To be used as a non-primary or secondary residence

See reverse side for definitions of a "primary residence, secondary residence" and "family member"

8. If you checked e or f in Item 6 above, indicate the number of units: _____
 For Apartments, Motels / Hotels, Mobile Home / RV Parks, etc.

THE UNDERSIGNED BEING DULY SWORN, ON OATH, SAYS THAT THE FOREGOING INFORMATION IS A TRUE AND CORRECT STATEMENT OF THE FACTS PERTAINING TO THE TRANSFER OF THE ABOVE DESCRIBED PROPERTY

Signature of Seller / Agent _____

State of New Mexico, County of _____

Subscribed and sworn before me on this _____ day of February, 2016

Notary Public _____

Notary Expiration Date _____

FOR RECORDER'S USE ONLY

2016-03356RP
 Page 1 of 4
 Cochise
 03-01-2016 02:25 PM
 2016-03356

9. TYPE OF DEED OR INSTRUMENT (Check Only One Box):

- a ☒ Warranty Deed d ☐ Contract or Agreement
 b ☐ Special Warranty Deed e ☐ Quit Claim Deed
 c ☐ Joint Tenancy Deed f ☐ Other: _____

10. SALE PRICE: \$ 510,322.50

11. DATE OF SALE (Numeric Digits) 01/31/2016
 Month / Year

12. DOWN PAYMENT \$ 90,000.00

13. METHOD OF FINANCING:

- a ☐ Cash (100% of Sale Price) e ☐ New loan(s) from financial institution:
 (1) ☐ Conventional
 (2) ☐ VA
 (3) ☐ FHA
 f ☐ Other financing; Specify: _____
 b ☐ Barter or trade
 c ☐ Assumption of existing loan(s)
 d ☒ Seller Loan (Carryback)

14. PERSONAL PROPERTY (see reverse side for definition):

- (a) Did the Sale Price in Item 10 include Personal Property that impacted the Sale Price by 5 percent or more? Yes ☐ No ☒
 (b) If Yes, provide the dollar amount of the Personal Property:

\$ 00 AND

briefly describe the Personal Property: _____

15. PARTIAL INTEREST: If only a partial ownership interest is being sold, briefly describe the partial interest:**16. SOLAR / ENERGY EFFICIENT COMPONENTS:**

- (a) Did the Sale Price in Item 10 include solar energy devices, energy efficient building components, renewable energy equipment or combined heat and power systems that impacted the Sale Price by 5 percent or more? Yes ☐ No ☒
 If Yes, briefly describe the solar / energy efficient components: _____

17. PARTY COMPLETING AFFIDAVIT (Name, Address, Phone Number):

Pioneer Title Agency, Inc.
363 W. 4th St., Benson, AZ 85602
 Phone: (520) 586-3733

18. LEGAL DESCRIPTION (attach copy if necessary):

SEE EXHIBIT "A" ATTACHED HERETO AND MADE A PART HEREOF.

Signature of Buyer / Agent _____

State of Arizona, County of _____

Subscribed and sworn to before me on this 26 day of February, 2016

Notary Public _____

Notary Expiration Date _____



JENNIFER L. SWINDLE
 Notary Public - State of Arizona
 COCHISE COUNTY
 My Commission Expires
 February 12, 2017

Arizona Department of Water Resources GWSI Well Report

Well Site ID 313650109452301 Local ID D-21-25 12DCC Quad Name GLEESON SE

Meridian	Site Type	Reliability	Topo Setting	Source	Map Scale	Latitude	Longitude	Accuracy	Lat DD	Long DD
G	W	C	V	USGS	24000	31 36 50	109 45 23	F	31.613889	-109.756389

ADWR File 55- Num	Altitude	Altitude Method	Altitude Accuracy	USGS Basin	Sub Basin	ADWR Basin	State	County	Site Uses	Water Uses	Hole Depth	Well Depth
619089	4135	M	020	DOU	DOU	DOU	AZ	03	U	U	640	640

Geo Unit Date Created 6/23/1980
 Complete? Current Index Book

Well Completion Date Completed 4/6/1966 Drill Method * P D F DAVIS

Casing	Top	Bottom	Diameter	Material
	0	637	16	S
Perforation	Top	Bottom	Diameter	Material
	149	637	16	S
	637	640	0	*
				X
				0

No Bore Hole Data Found

Well Lifts	Date Visited	Complete?	Lift	Power	Meter Number	Pwr Co	Hp	Account Number	Divider	Source	Method
	3/1/1967	D	N				0		0	*	*

Well Log	Log Type	Log Start	Log End	Source
	D	0	640	D

Owner Site Names	Other ID	Assigner
	4 BAR NO 4	OWNER

Well Owners	Date Entered	Complete?	Last Name	First Name	MI
	4/6/1966		COWAN	RALPH	C

Site Inventories	Date Inventoried	Complete?	Inventoried By
------------------	------------------	-----------	----------------

Arizona Department of Water Resources GWSI Well Report

Well Site ID 313650109452301 Local ID D-21-25 12DCC Quad Name GLEESON SE Page 2

Site Inventories	Date Inventoried	Complete?	Inventoried By
	3/1/1967		COX C

Water Levels	Date Measured	Complete?	Depth to Water	Method	Source	Water Level Elevation	Remark
	4/6/1966		60	R		4075	

Measuring Points	Date Established	Complete?	Msmt Point Height	Description
	4/6/1966		0	

No Pumping Discharge Data Found

No Remarks Data Found

No Water Quality Data Found



Transaction Receipt - Success

Arizona Water Resources
Arizona Water Resources
MID:347501639533
1700 W Washington St
Phoenix , AZ 85012
602-771-8454

01/17/2017 02:47PM
Remittance ID
Arizona011717163938989Joh
Transaction ID:
178353147

DAVID ANDRAUX
1440 W Ajo Way
TUCSON, Arizona 85713
United States
Visa - 2058
Approval Code: 38811G

Sale
Amount: \$165.00

38-18431-\$75
55-619086, 619089, 619091 -\$30 each=\$90
time tracking?
o
tjohnson@azwater.gov

Cardmember acknowledges
receipt of goods and/or
services in the amount of
the total shown hereon and
agrees to perform the
obligations set forth by the
cardmember's agreement with
the issuer.

Signature Phone Order
click here to continue.

Arizona Department of Water Resources

1110 West Washington Street, Suite 310

Phoenix AZ 85007

Customer:

DAVID ANDRAUX
1440 W. AJO WAY
TUCSON, AZ 85713

Receipt #: 17-49398

Office: MAIN OFFICE

Receipt Date: 01/17/2017

Sale Type: IN_PERSON

Cashier: WRSXV

Item No.	Function Code	AOBJ	Description	Ref ID	Qty	Unit Price	Ext Price
67531	WRFREV	4315-TT	Assignment of application, permit, certificate or statement of claim	38-18431	1	165.00	165.00
RECEIPT TOTAL:							165.00

Payment type: CREDIT CARD

Amount Paid: \$165.00

Payment Received Date: 01/17/2017

Notes: FROM TTA. FILING FEES FOR CHANGE OF OWNERSHIP FOR (3) THREE WELLS; 55-619086, 55-619089, 55-619091

Authorization 178353147

Sylvia Valdez

From: no-reply@velocitypayment.com
Sent: Tuesday, January 17, 2017 2:49 PM
To: Sylvia Valdez
Subject: Payment Receipt: Arizona Water Resources

Successful Payment Receipt

Please print this receipt for your records

Remittance ID: Arizona011717163938989Joh

Received: January 17, 2017 02:47PM MST

Right Or Permit Number: 38-18431-\$75

Annual Report Type: 55-619086, 619089, 619091 -\$30 each=\$90

Payment ID: time tracking?

SG ID: o

SG Email: tjohnson@azwater.gov

Amount: \$165.00

Transaction Type: Authorization and Capture

Card Information: Visa

David Andraux

*****2058

Billing information: Address Line 1: 1440 W Ajo Way

Country: United States

State: Arizona

City: TUCSON

ZIP Code: 85713

Run Date: 03/24/2016

AZ DEPARTMENT OF WATER RESOURCES

WELL REGISTRY REPORT - WELLS55

Location D 21.0 25.0 12 D C C Well Reg.No 55 - 619089 AMA DOUGLAS INA

Registered Name LUZ DIVINA ANDRAUX,
AS TRUSTEE OF THE SHALOM TRUST
1440 WEST AJO WAY
TUCSON AZ 85713

File Type REGISTERED WELL
Application/Issue Date 06/10/1982

Owner OWNER
Driller No. 0
Driller Name
Driller Phone
County COCHISE
Parcel No. 111-45-003G
Intended Capacity GPM 0.00

Well Type NON-EXEMPT
SubBasin DOUGLAS
Watershed WHITE WATER DRAW
Registered Water Uses IRRIGATION
Registered Well Uses WATER PRODUCTION
Discharge Method NONE
Power NO POWER CODE LISTED

Well Depth 640.00
Pump Cap. 1,736.00
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Finish STEEL - PERFORATED OR SLOTTED
CASING

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4/1/1966 755 WELL CONSTRUCTION COMPLETED
Action Comment:



Arizona Department of Water Resources
Water Management Support Section
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • www.azwater.gov

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 - ❖ You must include with your Notice:
 - check or money order for any required fee(s)
 - ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104
- ** PLEASE PRINT CLEARLY ****

RECEIVED

MAR 04 2016

ADWR ADWR

FILE NUMBER

D(21-25)12 DEC

WELL REGISTRATION NUMBER

55 - 619089

SECTION 1. REGISTRY INFORMATION

Well Owner		Location of Well					
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Cowan-NI, LLC		WELL LOCATION ADDRESS (IF ANY) VACANT LAND, Mc Neal, AZ 85617					
MAILING ADDRESS P.O. BOX 190 4990 Corrales		TOWNSHIP (N/S) 21 S	RANGE (E/W) 25 E	SECTION 12	160 ACRE SE ¼	40 ACRE SW ¼	10 ACRE SW ¼
CITY / STATE / ZIP CODE Corrales, NM 87048		LATITUDE Degrees Minutes Seconds ° ' "N		LONGITUDE Degrees Minutes Seconds ° ' "W			
CONTACT PERSON NAME AND TITLE		METHOD OF LATITUDE/LONGITUDE (CHECK ONE) <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Hand-Held <input type="checkbox"/> *GPS: Survey-Grade					
TELEPHONE NUMBER		*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (CHECK ONE) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):					
FAX (505) 897-9077		COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL 111 45 003G			COUNTY WHERE WELL IS LOCATED Cochise		

Type of Request (CHECK ONE)

- ☐ Change of Well Drilling Contractor (Fill out Section 2) ☒ Change of Well Ownership (Fill out Section 3) ☐ Change of Well Information (location, use, etc.) (Fill out Section 4)

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FEE \$120 per Well

- ♦ If drilling or abandoning a well, the Department must receive this request and issue authorization to the new drilling firm prior to the commencement of well drilling or abandonment.

Current Well Drilling Contractor		New Well Drilling Contractor	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL		FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL	
DWR LICENSE NUMBER		DWR LICENSE NUMBER	ROC LICENSE CATEGORY
TELEPHONE NUMBER	FAX	TELEPHONE NUMBER	FAX

SECTION 3. STATEMENT OF CHANGE OF WELL OWNERSHIP

FEE \$30 per Well

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CITY / STATE / ZIP CODE Corrales, NM 87048		CITY / STATE / ZIP CODE Tucson, AZ 85713	
CONTACT PERSON NAME AND TITLE		CONTACT PERSON NAME AND TITLE	
TELEPHONE NUMBER	FAX (505) 897-9077	TELEPHONE NUMBER	FAX (520) 807-9656

SECTION 4. CHANGE OF WELL INFORMATION (No Fee Required)

NOTE: Applies only to wells that have already been drilled. For proposed wells, an amended Notice of Intent to Drill a Well must be filed.

EXPLAIN

SECTION 5. OPTIONAL BY PROPERTY OWNER AND WELL OWNER ONLY

- ☐ By checking this box, I hereby provide ADWR permission to enter the property for the purpose of taking water level measurements at this well. (See instructions.)

SECTION 6. WELL OWNER SIGNATURE

I HEREBY CERTIFY that the above statements are true to the best of my knowledge and belief.

TYPE OR PRINT NAME AND TITLE
Luz Divina Andraux, as Trustee

SIGNATURE OF WELL OWNER

DATE

THECOUNTYRECORDER.COM

[\[Subscriber Log In \]](#)

Cochise County, AZ Recorder's Office

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Document Identifier

2016-03356

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Book-Page

Recording Date-Time

03-01-2016 02:25:35 PM

Document Type

WARRANTY DEED

Page Count

5

View Image

Image Not Available

Description

Grantor

COWAN-NI

Grantee

SHALOM TRUST

Related Documents -
Affected By[Reception#](#)[Document Type](#)[Relationship](#)[2016-03356RP](#)AFFIDAVIT OF
PROPERTY VALUE

Legal

[Lot](#) [Block](#) [Subdivision](#)[Section](#) [Township](#) [Range](#)

10 21S 25E

11 21S 25E

13 21S 25E

[Parcel ID](#)

11145003E

11145003G

11145018C

[Street](#) [City](#)

Recording Fees

[Fee Name](#)[Amount](#)

Recording

\$11.00

Real Property Transfer

\$0.00

Storage

\$4.00

Postage

\$0.00

Aff Of Labor

\$0.00

Total Fee

\$15.00

Requested By

Document Content Questions: please contact the appropriate [County Recorder's Office](#).**Web Site Questions:** please send any questions or comments regarding this site to [Support](#).

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Arizona Department of Water Resources

3550 N Central Ave.
Phoenix AZ 85012

Customer:

PIONEER TITLE AGENCY, INC.
363 W. 4TH ST.
BENSON, AZ 85602

Receipt #: 16-44136
Office: MAIN OFFICE
Receipt Date: 03/08/2016
Sale Type: IN_PERSON
Cashier: WRSYM

Item No.	Index	AOBJ	Description	Ref ID	Qty	Unit Price	Ext Price
81213	15239	4439-TT	Change of Ownership/Change of Well Information/Well Assignment	619089	1	30.00	30.00
RECEIPT TOTAL:							30.00

Payment type: CHECK

Amount Paid: \$30.00

Payment Received Date: 03/08/2016

Notes: FROM TTA.

Check # 70006525

Run Date: 01/24/2014

AZ DEPARTMENT OF WATER RESOURCES

WELL REGISTRY REPORT - WELLS55

Location	D 21.0 25.0 12 D C C	Well Reg.No	55 - 619089	AMA DOUGLAS INA
Registered Name	COWAN NI LLC 729 OLD CHURCH LANE CORRALES NM 87048	File Type	REGISTERED WELL	
		Application/Issue Date	06/10/1982	

Owner	OWNER	Well Type	NON-EXEMPT
Driller No.	0	SubBasin	DOUGLAS
Driller Name		Watershed	WHITE WATER DRAW
Driller Phone		Registered Water Uses	IRRIGATION
County	COCHISE	Registered Well Uses	WATER PRODUCTION
Parcel No.	111-45-003G	Discharge Method	NONE
Intended Capacity GPM	0.00	Power	NO POWER CODE LISTED

Well Depth	640.00	Case Diam	16.00	Tested Cap	1,736.00
Pump Cap.	1,736.00	Case Depth	640.00	CRT	
Draw Down	0.00	Water Level	73.00	Log	
		Acres Irrig	160.00	Finish	STEEL - PERFORATED OR SLOTTED CASING

Contamination Site: NO - NOT IN ANY WQARF SITE

Tribe: Not in a tribal zone

Comments 1/24/2014- Updated parcel information based on change of well information form. kc

Places Of Use

D 21 0 25 0 12

Current Action

1/24/2014 860 CHANGE OF WELL OWNERSHIP
Action Comment: kc

Action History

1/24/2014 880 CHANGE IN REMEDIAL ACTION SITE CODE
Action Comment: OLD WQARF code: null
5/29/2003 861 CHANGE OF WELL OWNERSHIP - CONVEYANCE
Action Comment: SW
4/1/1966 755 WELL CONSTRUCTION COMPLETED
Action Comment:



Arizona Department of Water Resources
Water Management Division
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • www.azwater.gov

Request to Change Well Information

RECEIVED

JAN 09 2014

ARIZONA DEPARTMENT
OF WATER RESOURCES

FILE NUMBER

WELL REGISTRATION NUMBER

55-619089

- ❖ Review instructions prior to completing form in black or blue ink.
 - ❖ You must include with your Notice:
 - check or money order for any required fee(s)
 - ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104
- ** PLEASE PRINT CLEARLY ****

SECTION 1. REGISTRY INFORMATION

Well Owner		Location of Well					
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL <i>Robert P. Giles & Ruth E. Cowan Trust</i>		WELL LOCATION ADDRESS (IF ANY)					
MAILING ADDRESS <i>P.O. Box 1030</i>		TOWNSHIP (N/S) <i>21</i>	RANGE (E/W) <i>25</i>	SECTION <i>12</i>	160 ACRE <i>D 1/4</i>	40 ACRE <i>C 1/4</i>	10 ACRE <i>C 1/4</i>
CITY / STATE / ZIP CODE <i>Tamabstone, Az. 85638</i>		LATITUDE Degrees Minutes Seconds <i>34 15 00 N</i>		LONGITUDE Degrees Minutes Seconds <i>108 05 00 W</i>			
CONTACT PERSON NAME AND TITLE <i>Ruth E. Cowan</i>		METHOD OF LATITUDE/LONGITUDE (CHECK ONE) <input type="checkbox"/> *GPS: Hand-Held <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade *IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (CHECK ONE) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify): <i>ADWS Info</i>					
TELEPHONE NUMBER <i>520-508-9380</i>	FAX	COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK <i>111</i> MAP <i>45</i> PARCEL <i>0036</i>				COUNTY WHERE WELL IS LOCATED <i>Cochise</i>	

Type of Request (CHECK ONE)

- ☐ Change of Well Drilling Contractor (Fill out Section 2) ☒ Change of Well Ownership (Fill out Section 3) ☐ Change of Well Information (location, use, etc.) (Fill out Section 4)

SECTION 2. REQUEST TO CHANGE WELL DRILLING CONTRACTOR

FEE \$120 per Well

- ♦ If drilling or abandoning a well, the Department must receive this request and issue authorization to the new drilling firm prior to the commencement of well drilling or abandonment.

Current Well Drilling Contractor		New Well Drilling Contractor	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL		FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL	
DWR LICENSE NUMBER		DWR LICENSE NUMBER	ROC LICENSE CATEGORY
TELEPHONE NUMBER	FAX	TELEPHONE NUMBER	FAX

SECTION 3. STATEMENT OF CHANGE OF WELL OWNERSHIP

FEE \$30 per Well

Previous Well Owner		New Well Owner	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL <i>same as above</i>		FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL <i>Cowan NI LLC</i>	
MAILING ADDRESS		MAILING ADDRESS <i>729 Old Church Lane</i>	
CITY / STATE / ZIP CODE		CITY / STATE / ZIP CODE <i>Corrales, NM 87048</i>	
CONTACT PERSON NAME AND TITLE		CONTACT PERSON NAME AND TITLE <i>Klassee Holly - Trustee</i>	
TELEPHONE NUMBER	FAX	TELEPHONE NUMBER <i>505-898-4074</i>	FAX

SECTION 4. CHANGE OF WELL INFORMATION (No Fee Required)

NOTE: Applies only to wells that have already been drilled. For proposed wells, an amended Notice of Intent to Drill a Well must be filed.

EXPLAIN

SECTION 5. OPTIONAL BY PROPERTY OWNER AND WELL OWNER ONLY

- ☐ By checking this box, I hereby provide ADWR permission to enter the property for the purpose of taking water level measurements at this well. (See instructions.)

SECTION 6. WELL OWNER SIGNATURE

I HEREBY CERTIFY that the above statements are true to the best of my knowledge and belief.

TYPE OR PRINT NAME AND TITLE <i>RUTH E. COWAN - TRUSTEE</i>	SIGNATURE OF WELL OWNER <i>Ruth E. Cowan</i>	DATE <i>1/9/14</i>
--	---	-----------------------

Printed: 1/24/2014 3:20:16 PM

Arizona Department of Water Resources

3550 N Central Ave.
Phoenix AZ 85012

Customer:

RUTH COWAN
PO BOX 1030
TOMBSTONE, AZ 85638

Receipt #: 14-31936
Office: MAIN OFFICE
Receipt Date: 01/24/2014
Sale Type: IN_PERSON
Cashier: WRKJC

Item No.	Index	AOBJ	Description	Ref ID	Qty	Unit Price	Ext Price
81213	15239	4439-TT	Change of Ownership/Change of Well Information/Well Assignment	619089	1	30.00	30.00
RECEIPT TOTAL:							30.00

Payment type: CHECK

Amount Paid: \$30.00

Payment Received Date: 01/24/2014

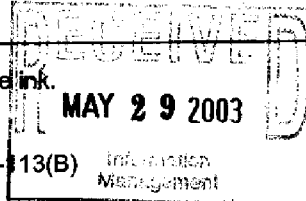
Notes: FROM TTA.

Check # 674



Arizona Department of Water Resources
Groundwater Management Support Section
P.O. Box 458 • Phoenix, Arizona 85001-0458
(602) 417-2470 • (800) 352-8488
www.water.az.gov

Request to Change Well Information



- ❖ Review instructions prior to completing form in black or blue ink.
- ❖ You must include with your Notice:
 - check or money order for any required fee(s)
- ❖ Authority for fee: A.A.C. R12-15-151(B)(4)(a), A.R.S. § 45-113(B)

FILE NUMBER
WELL REGISTRATION NUMBER 55-619089

** PLEASE PRINT CLEARLY **

SECTION 1. REGISTRY INFORMATION	
Well Owner	Location of Well
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL	WELL LOCATION ADDRESS (IF ANY)
MAILING ADDRESS <i>Lee Belau</i>	TOWNSHIP (N/S) 21 S RANGE (E/W) 25 E SECTION 12 160 ACRE SE ¼ 40 ACRE SW ¼ 10 ACRE SW ¼
CITY / STATE / ZIP CODE	LATITUDE LONGITUDE
CONTACT PERSON NAME AND TITLE	COUNTY ASSESSOR'S PARCEL ID NUMBER
TELEPHONE NUMBER	BOOK MAP PARCEL
FAX	COUNTY WHERE WELL IS LOCATED <i>Cochise</i>

Type of Request (CHECK ONE)		
<input type="checkbox"/> Change of Well Drilling Contractor (Fill out Section 2)	<input checked="" type="checkbox"/> Change of Well Ownership (Fill out Section 3)	<input type="checkbox"/> Change of Well Information (location, use, etc.) (Fill out Section 4)

SECTION 2. REQUEST TO CHANGE WELL DRILLING CONTRACTOR (\$10 Fee Required)	
♦ If drilling or abandoning a well, the Department must receive this request and issue authorization to the new drilling firm prior to the commencement of well drilling or abandonment.	
\$10 FEE	
Current Well Drilling Contractor	New Well Drilling Contractor
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL	FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL
DWR LICENSE NUMBER	DWR LICENSE NUMBER ROC LICENSE CATEGORY
TELEPHONE NUMBER	TELEPHONE NUMBER
FAX	FAX

SECTION 3. STATEMENT OF CHANGE OF WELL OWNERSHIP (\$10 Fee Required)	
♦ If this change pertains to more than one well and the names are the same, only one \$10 fee is required.	
\$10 FEE	
Previous Well Owner	New Well Owner
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL <i>Wm. R. Cowan</i>	FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL <i>Robert E. Giles & Ruth E. Cowan Trust</i>
MAILING ADDRESS <i>11444 E. Old Spanish Trail</i>	MAILING ADDRESS <i>P.O. Box 1030</i>
CITY / STATE / ZIP CODE <i>Levenson, Az. 85730-5665</i>	CITY / STATE / ZIP CODE <i>Tombstone, Az 85638</i>
CONTACT PERSON NAME AND TITLE <i>Bill Cowan</i>	CONTACT PERSON NAME AND TITLE <i>Ruth Evelyn Cowan</i>
TELEPHONE NUMBER <i>520-296-2758</i>	TELEPHONE NUMBER <i>520-457-3467</i>
FAX	FAX <i>520-457-3538</i>

SECTION 4. CHANGE OF WELL INFORMATION (No Fee Required)	
NO FEE	

NOTE: Applies only to wells that have already been drilled. For proposed wells, an amended Notice of Intent to Drill a Well must be filed.

EXPLAIN	
I HEREBY CERTIFY that the above statements are true to the best of my knowledge and belief.	
TYPE OR PRINT NAME AND TITLE <i>Ruth Evelyn Cowan</i>	SIGNATURE OF WELL OWNER <i>Ruth Evelyn Cowan</i>
	DATE <i>5/20/03</i>



Arizona Department of Water Resources
Groundwater Management Support Section
P.O. Box 458 • Phoenix, Arizona 85001-0458
(602) 417-2470 • (800) 352-8488
www.water.az.gov

Request to Change Well Information

- ❖ Review instructions prior to completing form in black or blue ink.
- ❖ You must include with your Notice:
 - check or money order for any required fee(s)
- ❖ Authority for fee: A.A.C. R12-15-151(B)(4)(a), A.R.S. § 45-113(B)

**** PLEASE PRINT CLEARLY ****

FILE NUMBER
WELL REGISTRATION NUMBER 55-619089

SECTION 1: REGISTRY INFORMATION						
Well Owner FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL				Location of Well WELL LOCATION ADDRESS (IF ANY)		
MAILING ADDRESS <i>Lee Belau</i>				TOWNSHIP (NS)	RANGE (EW)	SECTION
CITY / STATE / ZIP CODE				<i>21 S</i>	<i>25 E</i>	<i>12</i>
CONTACT PERSON NAME AND TITLE				160 ACRE	40 ACRE	10 ACRE
TELEPHONE NUMBER				<i>SE 1/4</i>	<i>SW 1/4</i>	<i>SW 1/4</i>
FAX				LATITUDE		
				LONGITUDE		
				Degrees	Minutes	Seconds
				Degrees	Minutes	Seconds
				COUNTY ASSESSOR'S PARCEL ID NUMBER		
				BOOK	MAP	PARCEL
				COUNTY WHERE WELL IS LOCATED <i>Cochise</i>		

Type of Request (check ONE)		
<input type="checkbox"/> Change of Well Drilling Contractor (Fill out Section 2)	<input checked="" type="checkbox"/> Change of Well Ownership (Fill out Section 3)	<input type="checkbox"/> Change of Well Information (location, use, etc.) (Fill out Section 4)

SECTION 2: REQUEST TO CHANGE WELL DRILLING CONTRACTOR (\$10 Fee Required)		
❖ If drilling or abandoning a well, the Department must receive this request and issue authorization to the new drilling firm prior to the commencement of well drilling or abandonment.		
\$10 FEE		
Current Well Drilling Contractor		New Well Drilling Contractor
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL		FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL
DWR LICENSE NUMBER		DWR LICENSE NUMBER
TELEPHONE NUMBER		ROC LICENSE CATEGORY
FAX		TELEPHONE NUMBER
		FAX

SECTION 3: STATEMENT OF CHANGE OF WELL OWNERSHIP (\$10 Fee Required)	
❖ If this change pertains to more than one well and the names are the same, only one \$10 fee is required.	
\$10 FEE	
Previous Well Owner	New Well Owner
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL <i>Wm. R. Cavan</i>	FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL <i>Robert E. Cavan & Ruth E. Cavan Trust</i>
MAILING ADDRESS <i>11444 E. Old Spanish Trail</i>	MAILING ADDRESS <i>P.O. Box 1030</i>
CITY / STATE / ZIP CODE <i>Levenson, AZ</i>	CITY / STATE / ZIP CODE <i>Tombstone, AZ 85638</i>
CONTACT PERSON NAME AND TITLE <i>Bill Cavan</i>	
TELEPHONE NUMBER <i>520-454-546</i>	
FAX <i>296-2758</i>	

TELEPHONE NUMBER <i>520-454-546</i>
FAX <i>296-2758</i>

NOTE: Applies only to wells the EXPLAIN

I HEREBY CERTIFY that the TYPE OR PRINT NAME AND TITLE <i>Ruth E. Cavan</i> DWR 55-71A (REVISED 03/20/03) Pg
--

G. C. CLOVERDALE CATTLE COMPANY, LL
385 GLEESON ROAD 457-3487
P.O. BOX 1030
TOMBSTONE, AZ 85638

91-170
8425 1221 AZ

4168

Pay to the order of

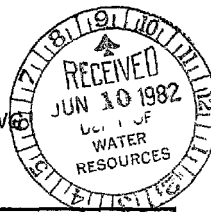
Dept. Water Resources \$10.00
Ten Dollars and no
Bank of America.

Change of Well Ownership
Ruth E. Cavan
[Signature]

DEPARTMENT OF WATER RESOURCES
99 EAST VIRGINIA AVENUE
PHOENIX, ARIZONA 85004

REGISTRATION OF EXISTING WELLS

READ INSTRUCTIONS ON BACK OF THIS FORM BEFORE COMPLETING
PRINT OR TYPE - FILE IN DUPLICATE



REGISTRATION FEE (CHECK ONE)

EXEMPT WELL (NO CHARGE) ☐

NON-EXEMPT WELL - \$10.00 ☒

13

FOR OFFICE USE ONLY

REGISTRATION NO. 55- 619089

FILE NO. D(21-25)12 dec

FILED 6-10-82 AT 9 am

(DATE) (TIME)

INA Douglas

AMA

1. Name of Registrant William R Cowan
Cloverdale Ranch Queen NM 88020
(Address) (City) (State) (Zip)

2. File and/or Control Number under previous groundwater law:
(File Number) _____ (Control Number) 35-

3. a. The well is located within the SW 1/4 SW 1/4 SE 1/4, Section 12,
of Township 21, N/S, Range 25 E/M, G & SRB & M, in the
County of Cochise.

b. If in a subdivision: Name of subdivision _____
Lot No. _____, Address _____

4. The principal use(s) of water (Examples: irrigation - stockwater - domestic - municipal - industrial)
Irrigation and all of the above

5. If for irrigation use, number of acres irrigated from well 160.

6. Owner of land on which well is located. If same as Item 1, check this box ☒

(Address) (City) (State) (Zip)

7. Well data (If data not available, write N/A)

a. Depth of Well 640 feet

b. Diameter of casing 16 inches

c. Depth of casing 640 feet

d. Type of casing Steel

e. Maximum pump capacity 1736 gallons per minute.

f. Depth to water 73 feet below land surface.

g. Date well completed April 1966
(Month) (Day) (Year)

MICROFILMED

8. The place(s) of use of water. If same as Item 3, check this box ☒
1/4 1/4 S 1/4, Section 12 Township 21 S Range 25 E
1/4 1/4 1/4, Section _____ Township _____ Range _____

Attach additional sheet if necessary.

9. DATE 5/27/82 SIGNATURE OF REGISTRANT William R Cowan

INSTRUCTIONS FOR COMPLETING REGISTRATION FORM

General Instructions

1. A person who owns an "Existing Well" shall register the well, pursuant to A.R.S. 45-593, by filing this form in duplicate with the Department of Water Resources not later than midnight June 14, 1982. The form must be completed and signed. Failure to do so will constitute a violation of A.R.S. 45-593, and may subject the well owner to injunction and/or civil penalties, pursuant to A.R.S. Title 45, Article 12.
2. An "Existing Well" means, (1) a well which was drilled on or before June 12, 1980 and which is not abandoned or sealed, or (2) a well which was not completed on or before June 12, 1980, but for which a Notice of Intention to Drill was on file with the Arizona Water Commission on or before June 12, 1980.
3. No registration fee is required for Exempt Wells. A \$10.00 registration fee must accompany registration forms for all Non-Exempt Wells.
4. An "Exempt Well" means a well having a pump with a maximum capacity of not more than 35 gallons per minute which is used to withdraw groundwater. An Exempt Well may include the non-commercial irrigation of not more than 1 acre of land.
5. A "Non-Exempt Well" means a well that is not an "Exempt Well".

INSTRUCTIONS FOR REGISTRATION QUESTIONS

1. The Registrant must be the owner of the well and may be an individual, public or private corporation, company, partnership, firm, association, society, estate, trust, any other private organization or enterprise, the United States, any state, territory or country or a governmental entity, political subdivision or municipal corporation organized under or subject to the constitution and laws of this State.
2. If you own an existing irrigation well drilled at any time, or any other type of well drilled on or after June 20, 1968, you should have an assigned control and/or file number. Write these numbers in item 2. If you do not know the number, please explain the reason on the form or on an attached sheet.
3.
 - a. Fill in the Section, Township and Range in all cases if it is available.
 - b. If the well is in a subdivision and you have this information, give the subdivision name, Lot Number, and Address.
4. Show all purposes for which the water is used.
5. If the well is used for irrigation, give the number of acres irrigated in 1980 from the well.
6. If the owner of the land is an individual, give the last name, first name, middle initial. If the owner of the land is a corporation, partnership, firm, etc., fill in the appropriate title.
7. Complete the section on Well Data with the most accurate information available to you. If the data is not available, write N/A in the blanks.
8. Give the legal description of the place of use of the water. If place of use is in a subdivision and legal description is not available, give the subdivision name, Lot Number and/or address on the blank line.
9. The person in whose name a well is registered shall notify the Department of any change in ownership and shall keep all information on the registration record current and accurate. A form entitled "Change of Well Information/Ownership" is available for this purpose. A blank form will be furnished with the returned duplicate copy of the registration form.

R C COWAN
COWAN BROTHERS
PO BOX 309
TOMBSTONE AZ 85638

STATE OF ARIZONA
DEPARTMENT OF WATER RESOURCES
WATER RIGHTS ADMINISTRATION
99 EAST VIRGINIA
PHOENIX, ARIZONA 85004

RECEIPT

KIND ENTRY	FILE REFERENCE NO.
55	619081
	THRU
55	619105

FOR: W R COWAN, & M E & R C COWAN TRUST

(25)

ACCOUNT NO.				INT. ACCT.	ITEM DESCRIPTION	RATE	\$ AMOUNT
FUND SOURCE	AGENCY	CHAPTER	DIV.				
					Filing Fee for Registration of Existing Wells	10.00	250.00
W R	COWAN	FILE NUMBERS:			M E COWAN & R C COWAN TRUST FILE NUMBERS:		
		D(21-25)14	acd	D(21-25)12	bbb	D(21-26)9	aaa
		D(21-25)14	bbc	D(21-25)1	dcc	D(21-26)9	baa
		D(21-25)14	ccb	D(21-25)1	dbb	D(20-26)19	bbc
		D(21-25)14	dcd	D(21-25)1	chb	D(20-25)24	daa
		D(21-25)13	bcc	D(20-25)36	bcc	D(20-25)24	ddd
		D(21-25)13	abc	D(20-25)36	ccc		
		D(21-25)13	ccc	D(20-25)36	abb		
		D(21-25)13	dbb	D(21-26)7	bda		
		D(21-25)12	dcc	D(21-25)4	ada		
		D(21-25)13	dda	D(21-26)4	daa		
						WAITER PAYMENT GUESTS 25 CHK NO 1299 250 10.00 55-I 250.00 TAX 0.00 TOTAL 250.00 GEN.CHEK 250.00	

Check No. 1299

8/30/82 jc

TOTAL

\$ # 1787 A 15:39
250.00

RECORDED