Run Date: 08/30/2017

### AZ DEPARTMENT OF WATER RESOURCES WELL REGISTRY REPORT - WELLS55

Well Reg.No

Location D 20.0 17.0 18 A C C

SONOITA

55 - 517942

AMA NOT WITHIN ANY AMA OR INA

Registered Name NICHOLE R & RICHARD M JR DENNIS

47 CURLY HORSE RAND ROAD

AZ 85637

File Type NEW WELLS (INTENTS OR APPLICATIONS)

0.00

Finish PLASTIC OR PVC

Application/Issue Date 05/29/1987

Owner OWNER Driller No. 344

Driller Name L.B. DRILLING

**Driller Phone** 

County SANTA CRUZ Parcel No. 109-01-026

Intended Capacity GPM

12.00

Well Type EXEMPT

SubBasin CIENEGA CREEK
Watershed SANTA CRUZ RIVER

Registered Water Uses DOMESTIC

Registered Well Uses WATER PRODUCTION

Discharge Method NONE

Power NO POWER CODE LISTED

CRT C Log X

**Tested Cap** 

Well Depth	255.00	Case Diam	6.00
Pump Cap.	0.00	Case Depth	255.00
Draw Down	0.00	Water Level	177.00
		Acres Irria	0.00

NO - NOT IN ANY REMEDIAL ACTION SITE

Tribe: Not in a tribal zone

**Contamination Site:** 

Comments

**Current Action** 

8/30/2017 860 CHANGE OF WELL OWNERSHIP

Action Comment: sm

**Action History** 

8/30/2017 856 CHANGE OF BOOK/MAP/PARCEL DATA

Action Comment: OLD BOOK/MAP/PARCEL: 109 1 109 by user WRSAM

1/29/2010 860 CHANGE OF WELL OWNERSHIP

Action Comment: pc

6/3/1987 755 WELL CONSTRUCTION COMPLETED

**Action Comment:** 

6/3/1987 750 WELL DRILLER REPORT AND WELL LOG RECEIVED/ENTERED

**Action Comment:** 

Water Management Division

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 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

AUG 17 2017

RECEIVED

WELL REGISTRATION NUMBER

ADWR

55 - 517942

FILE NUMBER

SECTION 1. REGISTRY INFO	ORMATION		A series and the series of
Well Owner		Location of Well	
FULL NAME OF COMPANY, ORGANIZATE POST	TION, OR INDIMDUAL	WELL LOCATION ADDRESS (IF ANY)  TOWNSHIP (N/S)   RANGE (E/W)   SECTION	se konon ka.
47 CUTLY HOR	se Ranch Rd	LATITUDE	1/4 1/4 1/4 LONGITUDE
Sonoita Az	85037	Degrees Minutes Secon	
CONTACT PERSON NAME AND TITLE		USGS Quad Map Conver	ntional Survey
TELEPHONE NUMBER	FAX	□ NAD-83 □ Other (please sp COUNTY ASSESSOR'S PARCEL ID N BOOK   MAP	Decify): NUMBER COUNTY WHERE WELL IS LOCATED PARCEL IS LOCATED
			0901026 Santa CIUZ
Type of Request (CHECK ONE)			f \\/-II In formation
☐ Change of Well Drilling Co (Fill out Section 2)	ntractor Change of Wel		e of Well Information on, use, etc.) (Fill out Section 4)
SECTION 2 PEOLIEST TO C	CHANGE WELL DRILLING CO		FEE \$120 per Well
<ul> <li>If drilling or abandoning a we</li> </ul>	ell, the Department must receive t mencement of well drilling or abar	this request and issue authorizati	on to the new
Current Well Drilling Contra		New Well Drilling Contra	ctor
FULL NAME OF COMPANY, ORGANIZA	TION, OR INDIMDUAL	FULL NAME OF COMPANY, ORGAN	IIZATION, OR INDIMDUAL
DWR LICENSE NUMBER		DWR LICENSE NUMBER	ROC LICENSE CATEGORY
TELEPHONE NUMBER	FAX	TELEPHONE NUMBER	FAX
SECTION 3. STATEMENT O	F CHANGE OF WELL OWNE	ERSHIP	FEE \$30 per Well
•		New Well Owner	
Previous Well Owner	ATION OR INDIMDUAL	FULL NAME OF COMPANY, ORGAN	NIZATION, OR INDIVIDUAL
FULL NAME OF COMPANY, ORGANIZA	ATION, OR INDIMDUAL	FULL NAME OF COMPANY, ORGAN RICHARD M. ON	NIZATION, OR INDIVIDUAL DENNIS
MULL POILS  MAILING ADDRESS  802 S - ECNO	VISTA DC.	RICHOLD M. and MAILING ADDRESS 47 CUTTY HOTS	NICOLE R. DENNIS BE RANCH Rd.
MALL POINT AZ 85	VISTA DC.	FULL NAME OF COMPANY, ORGAN RICHARD M. ON	NICOIE R. DENNIS BE Ranch Rd. 85037
MALL POINT AZ 85	JISTA Dr.	FULL NAME OF COMPANY, ORGAN RICHOLD M. OND MAILING ADDRESS 47 CUTY HOTS CITY / STATE / ZIP CODE CONTACT PERSON NAME AND TIT	NICOIE R. DENNIS BE Ranch Rd. 85037
MALL POINT AZ 85	VISTA DC.	FULL NAME OF COMPANY, ORGAN RICHOLD M. OND MAILING ADDRESS  GT CUTY/STATE/ZIP CODE  SONOTO AZ	NICOIE R. DENNIS BE Ranch Rd. 85037
MACH L. POINT MAILING ADDRESS  802 S - ECNO  CITY / STATE / ZIP CODE  CONTACT PERSON NAME AND TITLE  TELEPHONE NUMBER	JISTA Dr.	FULL NAME OF COMPANY, ORGAN RICHOLD M. OND MAILING ADDRESS  AT CUTY HOSS CITY STATE / ZIP CODE SONO HO AZ CONTACT PERSON NAME AND TIT	NICOIE R. DENNIS BE Ranch Rd. 85037
MAILING ADDRESS  BO2 S - ECMO  CITY / STATE / ZIP CODE  CONTACT PERSON NAME AND TITLE  TELEPHONE NUMBER  SECTION 4. CHANGE OF W	JISTA Dr.  U4)  FAX  VELL INFORMATION (No Fee F	FULL NAME OF COMPANY, ORGAN RICHOLD M. OND MAILING ADDRESS  CITY / STATE / ZIP CODE  CONTACT PERSON NAME AND TIT  TELEPHONE NUMBER  Required)	NICOIE R. DENNIS BE RANCH Rd. 85037
MAILING ADDRESS  BO2 S - ECMO  CITY / STATE / ZIP CODE  CONTACT PERSON NAME AND TITLE  TELEPHONE NUMBER  SECTION 4. CHANGE OF W	JISTA Dr.  U4)  FAX  VELL INFORMATION (No Fee F	FULL NAME OF COMPANY, ORGAN RICHOLD M. OND MAILING ADDRESS  CITY / STATE / ZIP CODE  CONTACT PERSON NAME AND TIT  TELEPHONE NUMBER  Required)	NICOIE R. DENNIS BE RANCH Rd. 85037
MATUL PORTON PANY, ORGANIZA  MATUL PORTON  MAILING ADDRESS  802 S - ECMO  CITY / STATE / ZIP CODE  CONTACT PERSON NAME AND TITLE  TELEPHONE NUMBER  SECTION 4. CHANGE OF W  NOTE: Applies only to wells that	JISTA Dr.  U4)  FAX  VELL INFORMATION (No Fee F	FULL NAME OF COMPANY, ORGAN RICHOLD M. OND MAILING ADDRESS  CITY / STATE / ZIP CODE  CONTACT PERSON NAME AND TIT  TELEPHONE NUMBER  Required)	NICOIE R. DENNIS BE RANCH Rd. 85037
MAILING ADDRESS  BO2 S - ECMO  CITY / STATE / ZIP CODE  CONTACT PERSON NAME AND TITLE  TELEPHONE NUMBER  SECTION 4. CHANGE OF W  NOTE: Applies only to wells that  EXPLAIN	FAX VELL INFORMATION (No Fee Fit have already been drilled. For p	FULL NAME OF COMPANY, ORGAN RICHOLD M. OND MAILING ADDRESS 47 CUTY HOTS CITY / STATE / ZIP CODE CONTACT PERSON NAME AND TIT TELEPHONE NUMBER  Required) roposed wells, an amended Notice  WELL OWNER ONLY	NICOLE R. DENNIS  BE RONCH Rd.  85037  TLE  FAX  ce of Intent to Drill a Well must be filed
MALLING ADDRESS  802 S - ECMO  CITY / STATE / ZIP CODE  CONTACT PERSON NAME AND TITLE  TELEPHONE NUMBER  SECTION 4. CHANGE OF W  NOTE: Applies only to wells that EXPLAIN  SECTION 5. OPTIONAL BY  By checking this box, I had the second	FAX VELL INFORMATION (No Fee For have already been drilled. For parently owner AND Verereby provide ADWR permission	FULL NAME OF COMPANY, ORGAN RICHOLD M. OND MAILING ADDRESS 47 CUTY HOTS CITY / STATE / ZIP CODE CONTACT PERSON NAME AND TIT TELEPHONE NUMBER  Required) roposed wells, an amended Notice  WELL OWNER ONLY	NICOLE R. DENNIS  BE RONCH Rd.  85037  TLE  FAX  ce of Intent to Drill a Well must be filed
MAILING ADDRESS  BO2 S - ECMO  CITY / STATE / ZIP CODE  CONTACT PERSON NAME AND TITLE  TELEPHONE NUMBER  SECTION 4. CHANGE OF W  NOTE: Applies only to wells that EXPLAIN  By checking this box, I have measurements at this well.	FAX VELL INFORMATION (No Fee Fit have already been drilled. For parently provide ADWR permission rell. (See instructions.)	FULL NAME OF COMPANY, ORGAN RICHOLD M. OND MAILING ADDRESS 47 CUTY HOTS CITY / STATE / ZIP CODE CONTACT PERSON NAME AND TIT TELEPHONE NUMBER  Required) roposed wells, an amended Notice  WELL OWNER ONLY	NICOTE R. DENNIS  BE RONCH Rd.  85037  TLE  FAX  ce of Intent to Drill a Well must be filed
MAILING ADDRESS  802 S - ECMO  CITY / STATE / ZIP CODE  CONTACT PERSON NAME AND TITLE  TELEPHONE NUMBER  SECTION 4. CHANGE OF W  NOTE: Applies only to wells that EXPLAIN  By checking this box, I have measurements at this w  SECTION 6. WELL OWNER	FAX VELL INFORMATION (No Fee Fit have already been drilled. For parently provide ADWR permission rell. (See instructions.)	FULL NAME OF COMPANY, ORGAN RICHOLD M. OND MAILING ADDRESS 47 CUTY HOTS CITY STATE 7 ZIP CODE SONO HO AZ CONTACT PERSON NAME AND TIT TELEPHONE NUMBER  Required) TOPOSED WELL OWNER ONLY To enter the property for the purposes of my knowledge and belief.	PAX  TE  FAX  The property of
MAILING ADDRESS  802 S - ECMO  CITY / STATE / ZIP CODE  CONTACT PERSON NAME AND TITLE  TELEPHONE NUMBER  SECTION 4. CHANGE OF W  NOTE: Applies only to wells that EXPLAIN  By checking this box, I have a measurements at this w  SECTION 6. WELL OWNER	FAX  VELL INFORMATION (No Fee Fit have already been drilled. For particular provide ADWR permission reell. (See instructions.)  R SIGNATURE  Prove statements are true to the been dead of the be	FULL NAME OF COMPANY, ORGAN RICHOLD M. OND MAILING ADDRESS AT CUTY HOTS CITY / STATE / ZIP CODE SONO HO AZ CONTACT PERSON NAME AND TIT TELEPHONE NUMBER  Required) TOPOSED WELL OWNER ONLY To enter the property for the purp	PAX  DATE  NICOIE R. DENIIS  BE RONCH Rd.  B

#### Property Records Inquiry

Print This Page Revise Search

**General Information** 

**Property Address** 

47 CURLY HORSE RANCH RD SONOITA, 85637

**Owner Name & Address** 

Primary Owner DENNIS NICOLE R & RICHARD M JR 47 CURLY HORSE RANCH RD SONOITA, AZ 85637 100.00%

**Legal Description** 

Subdivision: Lot:

Extended Legal: SUB CURLEY HORSE RANCH ESTATESTHE W2 W2 OF PARCEL'C'

**Property Information** 

Parcel Number: 10901026

Tax District: 2501

Square Feet: 432,986.40

Account Number: R000010055

**Current Mill Levy: 0** 

Total Acres: 9.94

Primary Use Description: 8713-SFR/> 5 AC,RURAL SUBDVD

Block:

#### **Sales Information**

Reception #	Sale Price	Deed Type	SaleDate	Grantor	Grantee
20170005689	\$300,000	WARRANTY DEED	07/01/2017	PARR ROBERT L & MARY L	DENNIS NICOLE R & RICHARD M JR
20100000626	\$289,000	JOINT TENANTS	10/01/2010	MCCARTY JOHN & GERA LYNN	PARR MARY L & ROBERT L
19960003240	\$190,000	JOINT TENANTS	04/26/1996		
19890009065	\$38,000	WARRANTY DEED	12/21/1989		

#### Value Information Approach: Cost

Abstract Code/Description	Value Type	Appraised Value	Assessed Value	Taxable Value
02RL Vacant Land Non-Profit	Land	\$32,305	\$4,846	\$4,846
03I Owner Occupied Residential	Improvement	\$152,046	\$15,205	\$15,205
03L Owner Occupied Residential	Land	\$32,305	\$3,231	\$3,231
02RI Ag/Vacant Imp Non-Profit	Improvement	\$8,775	\$1,316	\$1,316
	Totals:	\$225,431	\$24,598	\$24,598

#### **Limited Property Value (LPV)**

Abstract Code/Description	Value Type	LPV Actual	LPV Assessed	LPV Taxable Value
02RL Vacant Land Non-Profit	Land	\$32,305	\$4,846	\$4,846
03I Owner Occupied Residential	Improvement	\$152,046	\$15,205	\$15,205
03L Owner Occupied Residential	Land	\$32,305	\$3,231	\$3,231
02RI Ag/Vacant Imp Non-Profit	Improvement	\$8,775	\$1,316	\$1,316
	Totals:	\$225,431	\$24,598	\$24,598

#### **Account Flags**

Flag Type	Flag Description	Unit Count

#### **Property Attributes & Descriptions**

Attribute	Attribute Description	
The Parcel has the fol	lowing Exemptions:	
A2 Physically Unchanged	Improvement	

#### **Building ID 1.00**

Single Family Residential **Occupancy Description** Rooms **Built As** Ranch 1 Story Bedrooms

Exterior	Frame Stucco	Baths		0	
HVAC	Cool Air in Heat Ducts	Year Built		1991	
BuildingImage]					
Detail Type	Detail Desc	cription		Units	
Fixture	Sink Standar	rd .		1.0000	
Fixture	Bath 4			1.0000	
Fixture	Bath 2			1.0000	
Appliance	Allowance			1.0000	
Rough In	Laundry Fac	sility		1.0000	
Garage	Attached			620.0000	
Porch	Open Slab			583.0000	
Fixture	Water Heate	er	H. F. C.	1.0000	
Porch	Slab Roof			144.0000	
Building ID 2.00					
Occupancy Description	Barn	Rooms	0		
Built As	Barn	Bedrooms	0		F3-4 _
Exterior		Baths	0		
HVAC	None	Year Built	2001		
[BuildingImage]					

# **District Map**

Select the district to find out who your Supervisor is, you may also submit your full address in the search field (address, city, state).

Please be patient, this map will take some time to load.



Printed: 8/30/2017 3:33:13 PM

# **Arizona Department of Water Resources**

1110 West Washington Street, Suite 310 Phoenix AZ 85007

Customer:

TITLE SECURITY AGENCY, LLC 10222 E. RITA ROAD, SUITE 190 TUCSON, AZ 85747

Receipt #: 18-53603

Office: MAIN OFFICE

Receipt Date: 08/30/2017 Sale Type: IN\_PERSON

Cashier: WRSAM

30.00	TOTAL:	RECEIPT TOTAL:					
				Information/Well Assignment			
30.00	30.00	1	517942	WRFREV 4439-TT Change of Ownership/Change of Well	4439-TT	WRFREV	81213
Ext Price	Unit Price	Qty	Ref ID	Description	AOBJ	Item No. Function Code AOBJ Description	Item No.

Payment type: CHECK

Amount Paid: \$30.00

Payment Received Date: 08/30/2017

Check # 24

241543

241543

Notes: FROM TT

Borrower: Nicole R. Dennis and Richard M. Dennis, Jr.

Seller: Robert L. Parr and Mary L. Parr Property: 47 Curly Horse Ranch Rd./Sonoita

Tax Parcel ID: 10901026

Check Amount: \$30.00

Pay To: Arizona Department of Water Resources

Order Number: 600-94315/123

Memo: 55-517942

For: Well transfer fee

Well transfer fee (H.09) \$30.00

Issued By:AS

No refund with

Water Management Support Section P.O. Box 33589 Phoenix, Arizona 85067-3589

(602) 771-8500 • (800) 352-8488

Request to Change Well Information

www.azwater.gov Review instructions prior to completing form in back or blue ink.
You must include with your Notice:

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)

JAN 29 2010

** PLEASE PRINT CLEARLY ** WATER WORM						
SECTION 1. REGISTRY INF	ORMATION					
Well Owner		Location of Well				
FULL NAME OF COMPANY, ORGAN	IZATION, OR INDIVIDUAL	WELL LOCATION ADDRESS (IF ANY)				
RALPH KENNELL	,	47 CURLY HORSE ROAD , SONOITA, AZ 85637				
MAILING ADDRESS		TOWNSHIP (N/S)		SECTION 160 ACRE		CRE
3940 E. TIMROD #168		20\$	17E	18 $M$	x SW S	W
CITY / STATE / ZIP CODE		LATITUDE		LONGITUDE		7,62
TUCSON, AZ 85711		۰		" <sub>N</sub>	ı )	"w
		Degrees		Seconds Degree	s Minutes	Seconds
CONTACT PERSON NAME AND TITI	LE	METHOD OF L	ATITUDE/LONGITE	UDE (CHECK ONE)	□ *GPS: Hand-H	eld
		☐ USGS Quad	Map □ Cor	nventional Survey	□ *GPS: Survey-	Grade
TELEPHONE NUMBER	FAX	*IF GPS WAS U	JSED, GEOGRAPI	IIC COORDINATE D	ATUM (CHECK ONE)	
		□ NAD-83	☐ Other (pleas			
		COUNTY ASSE	SSOR'S PARCEL		COUNTY WHERE W	— VE1.I
		воок	MAP	PARCEL	IS LOCATED	
		109	01	109-01-026	SANTA CRUZ	ı
Type of Request (CHECK ONE)						
☐ Change of Well Drilling Co	ontractor	Ownership		Change of Well In	nformation	
(Fill out Section 2)	(Fill out Section				c.) (Fill out Sectio	n 4)
SECTION 2. REQUEST TO C	HANGE WELL DRILLING CON	TRACTOR (\$	10 Fee Require	ed)		
	ell, the Department must receive this				\$10	FEE
drilling firm prior to the comm	nencement of well drilling or abandor	nment.	ue authorization	to the new		
Current Well Drilling Contra	ctor		rilling Contrac	tor	•	
FULL NAME OF COMPANY, ORGANI	ZATION, OR INDIVIDUAL			ANIZATION, OR IND	IVIDUAL	
DWR LICENSE NUMBER		DWR LICENSE			NSE CATEGORY	
	<b>-</b>			- ROG LIGE	INSE CATEGORY	
TELEPHONE NUMBER	FAX	TELEPHONE N	UMBER	FAX		
	F CHANGE OF WELL OWNERS				\$10	FEE
<ul> <li>If this change pertains to more</li> </ul>	re than one well and the names are t	the same, only o	ne \$10 fee is rec	quired.		
Previous Well Owner		New Well O	wner			
FULL NAME OF COMPANY, ORGANI	ZATION, OR INDIVIDUAL	FULL NAME OF	COMPANY, ORGA	ANIZATION, OR IND	IVIDUAL	
RALPH KENNELL		MARY L. PA				
MAILING ADDRESS 3940 E. TIMROD #168		MAILING ADDR				
CITY / STATE / ZIP CODE			VISTA DRIVE	Ē		
TUCSON, AZ 85711		VAIL, AZ 85				
CONTACT PERSON NAME AND TITLE			SON NAME AND T	TT: C	<u> </u>	
_		CONTINOTIEN	SON NAME AND I	HEE		
TELEPHONE NUMBER	FAX	TELEPHONE N	JMBER	FAX		
SECTION 4. CHANGE OF WI	L ELL INFORMATION (No Fee Re	equired)			NO F	EE
· · · · · · · · · · · · · · · · · · ·		<del></del>				
EXPLAIN	t have already been drilled. For p	roposed wells,	an amended No	otice of Intent to D	orill a Well must be	filed.
EXPLAIN						
		<del></del>				
SECTION 5. OPTIONAL BY P	ROPERTY OWNER AND WELL	LOWNER ON	LY			
By checking this box, I h	nereby provide ADWR permissio	n to enter the	property for the	purpose of taking	ng water level	
measurements at this w SECTION 6. WELL OWNER S	The state of the s				¥	
		-5				<b>——</b>
TYPE OR DRINT NAME AND TITLE	ove statements are true to the best				,	
TYPE OR PRINT NAME AND TITLE  MARY L, HAR	2	SIGNATURE OF	ANEDY OMNEW	OBC "	DATE /	10
DWR 55-71A (REVISED 09/30/08) Pa	ge 1 of 1		J	<u> </u>	1/(X-1/	

3550 N Central Ave.

Phoenix AZ 85012

Customer:

PIONEER TITLE AGENCY, INC PO BOX 1900

SIERRA VISTA, AZ 85636

10-9966 Receipt #:

MAIN OFFICE Office:

1/29/2010 Mail Receipt Date: Sale Type:

WRCCC Cashier:

Item No.	Index	AOBJ	Description	RefID	QŧA	Oty Unit Price	Ext Price
9100	15238	4439-12	WELL ASSIGNMENTS/CHANGE OF WELL OWNED SHIP	55-517942	1	10.00	10.00
			WELL OWNERSHIP		RECEIPT TOTAL	TOTAL	10.00

Payment type: CHECK

Amount Paid: \$10.00

Check#

745776

Payment Received Date: 1/28/2010 Seller: McCARTY Notes:

Previous Well Owner: RALPH KENNELL Buyer / New Well Owner: MARY L. PARR

# RECFIVE II AUG 3 1987 DEPT OF WATER RESOURCES

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

#### WELL DRILLER REPORT

This port should be prepared by the driller in all detail and filed with the Department within 30 days following completion of the well.

1.	Owner_ Mile Solf
	2600 Fest - Cua Heet 193 Acceson & 85741
	Mailing Address ( )
2.	Driller B. DRILLING
	<b>Box 4166</b> Name
	Huachuca City, AZ 85616
	Mailing Address
3.	Location of well: 1-208 R-17E S-18 SWXSWXNE
4.	Permit No.
	(if issued)
	DESCRIPTION OF WELL
5.	Total depth of hole 255 ft.
6.	Type of casing PVC
7.	Diameter and length of casing 6 in. from 0 to 235, in from to
o	Mathala Garatina and American American
8.	Method of sealing at reduction points
9.	Perforated from 253 to 215, fromtototo
10.	Size of cuts
11.	If screen was installed: Lengthft. Diamin. Type
12.	Method of construction drilled air
•	drilled, dug, driven, bored, jetted, etc.
13.	Date started 747c 3 87
	Month Day Year
14.	Date completed Tune 3 87
	Month Day Year
15.	Depth to waterft. (If flowing well, so state.)
16.	Describe point from which depth measurements were made, and give sea-level elevation
	if available ground level
17.	If flowing well, state method of flow regulation:
18.	Remarks: Blew 40 gpm 55-517942
	D(20-17) 18 acc
	·l
	Entered ENTERED AUGO 7 1987

#### LOG OF WELL

Indicate depth at which water was first encountered, and the depth and thickness of water bearing beds. If water is artesian, indicate depth at which encountered, and depth to which it rose in well.

From (feet)	To (feet)	Description of formation material
0	23	brown clay
23	90	Sandy brown clay
90	220	brown gravelly sandy clay
220-	255	Cemented Sand grovel grey and brown
		ter water
	1	
	•	
•		
	~····	·

I hereby certify that this well was drilled by me (or under my supervision), and that each and all of the statements herein contained are true to the best of my knowledge and belief.

Driller

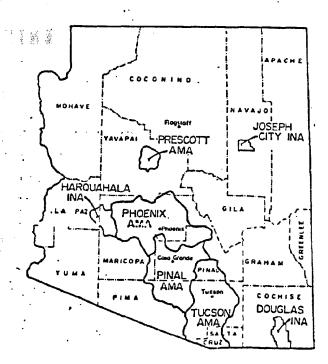
Driller Occident	
Name	
L. B. DRILLING	
Huachuca City, AZ 85616	
City State	Zip
Date 7-30-87	

FILLING FEE STO MING.	DEPARTMENT OF WATER RESOURCES (DWR) CE OF INTENTION TO DRILL OR DEEPEN A WE OUTSIDE OF AN ACTIVE MANAGEMENT AREA			
Section 45-500 Arillona Revise a person may mot department of filing a Notice of Arms 1800 BM	ed tatutes, provides: In an area not see to be drilled any well or deepen an element.	ubje exist	ct to Active Management, ing well without first	
NORTH	DESCRIPTION OF WELL:		PLACE OF USE:	
200 LICIS 1100 8	8. Diameter6 inches	16.	Township 20 N/S	
NW /4 NE /4	Depth 260 feet	17.	Range	
WEST EAST	9. Type of casing PVC	18.	Section	فعرين
WEST	10. Design pump capacity:	19.	Legal description	
sw14-se14-			of land SW X SW X NE	•
	11. Estimate of total annual			
· SOUTH .	pumping: acre feet	20.	Type well:	
INDICATE WELL LOCATION BY X	12. Principal use of water:		X Exempt	
(Above diagram represents one 640 acre section.)			Non-Exempt	
:	domestric  (Be Specific)	21.	Action Requested:	
WELL/LAND LOCATION:  1. Township 20 N	13. Other uses intended:		Drill Deepen_Replace_	
2. Range 17 (F)/W	None		55	
3. Section 18 4. Su 2, Su 2. NE 2	(Be Specific)	22.	This notice filed by:	
10 acre subdivision	14. If for irrigation, state the		Owner /	
5. County SANTA Crun	number of acres to be irrigated:  NA acres		Lessee T	
6. Owner of well:  Mike Wolf	15. Construction will start about:		Mike Wolf	
Name	Month SZ Month Year	•	Name 2600 West Zna Fleet 183	3
2600 West Ine Fleet 193	DO NOT WRITE IN THIS SPACE		Address	
Mailing address Tucson 42, 8574	OFFICE RECORD		Tucson, Az. 8579 City State Zip	r)
City State Zip	FILE NO. 20 -17 18 acc		Telephone 575 - 0868	
Telephone 575-0868	FILED DE NILL BY STATE OF THE PROPERTY OF THE	23.	Drilling Firm:	
7. Owner of land:	INPUT EN EN EN ED JON BY 1 1901	·	L. B. DRALING Name Box 4166	
Name Name	DUPLICATE 529-87 BY SV		Hunchica City, AZ 89616 Address	
	REGISTRATION NO. 55-517942		Address	
Mailing Address	INA	ĺ	City State Zip	>
City State Zip	W/SS/B		DWR License Number	>
24, Is the proposed wellsite landfill, hazardous waste	within 100 feet of a septic tank system facility or storage area of hazardous <u>CENERAL INSTRUCTIONS</u>	n, se mate	rials: Yes No	
<ol> <li>For specific instructions</li> <li>This form is to be used to</li> <li>If the well is a replacem of the existing well in I</li> <li>Construction standards for</li> </ol>	licate and send to 99 East Virginia, Sur, limitations and conditions, see the red drill, deepen or replace a well outsident or deepening of an existing well, statem 21.  I new and replacement wells and the deep n accordance with Department Rules and	evers de of tate penir	se side of this form. f an Active Management Are the registration number ag and abandonment of	:a.
to the best of my knowled	is filed in compliance with ARS \$45-596 ge and belief and that I understand the t forth on the reverse side of this for	limi	is complete and correct itations under which I	
	llati	NID		
DATE May 20/87	Signature of Person Filing	Just	7	
DNR-55-(1-8/86 (Revised)	•			

A District of the State of the

#### SPECIFIC INSTRUCTIONS, LIMITATIONS AND CONDITIONS

- 1. Upon receipt of the return of this annotated Notice, the owner is authorized to proceed in drilling or deepening the well as set forth on this Notice.
- 2. An exempt well means a well having a pump with a maximum capacity of not more than thirty-five (35) gallons per minute and may include the application of water to less than two (2) acres of land to produce plants or parts of plants for sale, human consumption or for use as feed for livestock, range livestock or poultry.
- 3. Only one exempt well may be <u>drilled or used</u> to serve the same use at the same location.
- 4. A non-exempt well is any well which exceeds the limitations, as indicated in paragraph 2 above. However, water from a non-exempt well located in an Irrigation Non-Expansion Area, may not be withdrawn to irrigate any acres which are not eligible to be irrigated pursuant to ARS \$45-434 or \$45-437. Also, owners of non-exempt wells located in Irrigation Non-Expansion Areas, are subject to the measuring device and annual report requirements of ARS \$45-437.
- 5. The drilling or deepening of this well shall be completed within one (1) year of the date of this Notice.
- 6. Within thirty (30) days after the installation of pumping equipment on this well, the registered well owner shall file the prescribed Completion Report. A form for this purpose will be furnished to the registered owner with the return of an annotated copy of this Notice.
- 7. The person to whom a well is registered shall notify the Department of a change in ownership or a change in data relating to this well. The prescribed form for these purposes will be furnished to the registered owner with the return of the annotated copy of this Notice.
- 8. A sketch map showing the general boundaries of the Active Management Areas and Triigation Non-Expansion Areas is shown at the right. Maps of greater detail are available on request.





99 East Virginia Avenue Phoenix, Arizona 85004 (602) 255-1553

Evan Mecham, Governor Alan P. Kleinman, Director

MIKE WOLF 2600 West Ina Fleet 193 Tucson, Az. 85741 MAY 29, 1987

File No. D(20-17)18 acc Registration No. 55-517942

Dear Well Owner:

Enclosed for your records is a copy of the Notice of Intention to Drill a well which was recently filed with this Department. This is returned to you as evidence of compliance with ARS \$45-596. Also enclosed is a Completion Report to be submitted when pump equipment is installed. Your driller has been mailed separately a Well Drilling Card and a Well Drilling Report form. Your driller may not begin to drill your well until he has received the Well Drilling Card, and is required to display the Drilling Card on his rig while drilling. If you elect to change drillers, you are required to notify this Department of that fact and who the new driller is. Please ensure that any driller you elect to use is properly licensed to drill the type of well you require since licensed well drillers must pass an examination that proves they understand professional well drilling methods and they are familiar with the laws and regulations which govern well construction in Arizona.

In the event that you determine it necessary to change the location of the proposed well, you should obtain the written permission of the Department of Water Resources before proceeding with the drilling. A properly signed amended Drilling Card must be in the possession of the driller before drilling commences at a different location than originally authorized.

ARS \$45-600 requires the registered well owner to submit a Completion Report within 30 days after the installation of pumping equipment. It also requires the driller to furnish this Department a complete and accurate log of the well within 30 days after completion of drilling. You should insist and ensure that both of these are done.

For your <u>future</u> use, a Change of Well Information form is enclosed should it become needed. Per ARS §45-593, the person to whom a well is registered shall notify this Department of a change in ownership of the well and/or information pertaining to the physical characteristics of the well in order to keep the well registration file current and accurate.

Since/ely,

ichard A. Gessner

Chief, Operations Division

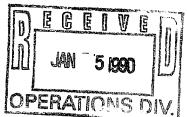
RAG: SV Enclosures

DWR-55-1-10/84 (Revised)

### DEPARTMENT OF WATER RESOURCES 99 East Virginia Avenue Suite 100 Phoenix, Arizona 85004

#### CHANGE OF WELL INFORMATION

request to	ne following informat	cion be char	nged in Well File Number D(20-17)	
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Data		, 19		
Date		, 19	Signature of Well Owner	
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	of the well describe		, sw ½ sw ½ ne ½	
	n #55- 517942		File No. D 201718 acc	
Address Mike Wolf Previous Ow	New Addro Mike Wolf	ess	Ralph H and Grace M. Kennell	
0400	na Fleet 11501 Loc	kwood \$216	3940 E. Timrod #168 Address	
Address			Tucson, AZ 85711 City State	Zir
Address Tucson, AZ City	85741 Yukon, Ok State 73099	Zip	Gity State	



NOTE: SAVE THIS FORM TO REPORT FUTURE CHANGES IN OWNERSHIP OR WELL DATA SUCH AS PUMP CAPACITY, ETC.

ENTEREDJAN11 1990

L.B. DRILLING BOX 4166 Huachuca City, Az. 85616

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

1

FOR: MIKE WOLF

KIND	FILE REFERENCE NO.
55	517942
	THRU
[	

RECEIPT

ACCOUNT NO.		INT.					
FUND SOURCE	AGENCY	CHAPTER	DIV.	ACCT.	ITEM DESCRIPTION	RATE	\$ AMOUNT
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TOTAL

10,00