

ANNUAL RECOVERY WELL REPORT

RW - SUMMARY 2015

PERMIT HOLDER

PERMIT NUMBER

LONG TERM STORAGE ACCOUNT NUMBER

REPORTING PARTY

If any of the information preprinted on this report is incorrect, please make the necessary changes.

PART I WATER RECOVERED

- | | | |
|---|----------------------|-------------|
| A) Total volume of water in acre-feet recovered as annual recovery from box 9 of RW - SCHEDULE 74: | <input type="text"/> | ACRE - FEET |
| B) Total volume of water in acre-feet recovered as Long Term Storage credits from box 10 of RW - SCHEDULE 74: | <input type="text"/> | ACRE - FEET |
| C) Total volume of water recovered in acre-feet from box 11: | <input type="text"/> | ACRE - FEET |

PART II LONG TERM STORAGE RECOVERY FEE

Enter volume from Part I.B. above: ACRE - FEET X \$1.00 FEE = \$ TOTAL

PART III LATE FEES

Complete this section if filing after March 31.

Note: A portion of a month after March 31 is counted as a full month.

- | | | |
|--|--|--|
| A) Enter number of months late (Maximum of 6) <input type="text"/> | B) Calculate Late Report Fee (\$25.00 X number of months late) \$ <input type="text"/> | C) Calculate Late Payment Fee (Recovery fee calculated in Part II X 10% X number of months late) \$ <input type="text"/> |
|--|--|--|

PART IV TOTAL FEES DUE

Total fees due (Part II + Part III.B + Part III.C): \$

Mail or hand deliver this report, together with the appropriate schedules, worksheets, and fees to the Arizona Department of Water Resources. If mailed, the report must be mailed to P.O. Box 36020 Phoenix, AZ. 85067 and postmarked no later than March 31, 2016. If hand delivered, the report must be received by the Department's Annual Reports & Planning Section no later than 5:00 PM on March 31, 2016.

REPORTS FILED AFTER MARCH 31, 2016 ARE SUBJECT TO LATE FEES [ARS § 45-875.01(E)].

I hereby certify, under penalty of perjury, that the information contained in this report is, to the best of my knowledge and belief, true, correct and complete.

X _____
 AUTHORIZED SIGNATURE TITLE DATE

 PRINTED NAME TELEPHONE NUMBER

NOTE: THIS REPORT MUST BE FILED EVEN IF NO WATER WAS RECOVERED PURSUANT TO THE PERMIT.

ARIZONA DEPARTMENT OF WATER RESOURCES



DOUGLAS A. DUCEY
Governor

THOMAS BUSCHATZKE
Director

January 23, 2016

Dear Recovery Well Permit Holder:

Enclosed are your Annual Recovery Well Report forms for calendar year 2015. The summary page is printed on the reverse side of this letter. This report is for Recovery Well Permit Holders who recover water annually (pursuant to A.R.S. § 45-851.01) or who recover Long-term Storage Credits. As a Recovery Well Permit holder, you are required to pay a Long-term Storage Recovery Fee.

The Department has preprinted certain information from our records onto these forms. If any of the preprinted information is incorrect, please make the necessary changes. Please note that a separate annual report form must be filed for each Recovery Well Permit. [Separate checks should be enclosed to cover the fees associated with each Recovery Well Permit and the Recovery Well Permit number should be written on the check.](#)

[Persons who did not recover water during 2015 are required to return the form with zeros in the appropriate blanks.](#)

[Reports must be received by the Department or postmarked no later than March 31, 2016](#) The penalty for filing late is \$25.00 per month or part of a month that the report is late up to \$150.00. In addition, if you recovered Long-term Storage Credits and did not pay the Long-term Storage Recovery fee on time, the penalty is 10% of the unpaid fee per month or part of a month that the fees are delinquent, up to a maximum of 60% of the unpaid balance. In addition, after six months, the Department may take further enforcement action for failure to file an Annual Report, including seeking civil penalties in an amount not less than \$250.00.

We have tried to provide you with the proper forms according to information in our files. Failure to receive the proper forms does not relieve a person of the responsibility of keeping the required records or filing the required reports. You may wish to copy this report for your records.

If you need help or have questions, contact the AMA Section at 602-771-8585.

Sincerely,

A handwritten signature in black ink, appearing to read "Clint Chandler".

Clint Chandler
Assistant Director
Water Planning & Permitting Division