



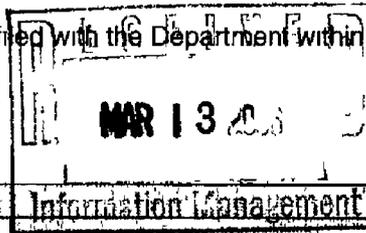
ARIZONA DEPARTMENT OF WATER RESOURCES
 Records Management Section
 500 N 3rd Street * Phoenix, Arizona 85004
 (602) 417-2405 * (800) 352-8488
 www.water.az.gov

**Well Driller Report
 and
 Well Log**

L.L. Coyillas Ranch

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

** PLEASE PRINT CLEARLY **



FILE NUMBER
D(20-21) 14 BCC
 WELL REGISTRATION NUMBER
55- 207825
 PERMIT NUMBER (IF ISSUED)

SECTION 1. DRILLING AUTHORIZATION	
Drilling Firm	
NAME FARMERS PUMP CO. DBA FARWEST PUMP CO. INC	DWR LICENSE NUMBER 307
ADDRESS 3230 W. EL CAMINO DEL CERRO	TELEPHONE NUMBER 520-293-9778
CITY/STATE/ZIP TUCSON, AZ 85745	FAX

SECTION 2. REGISTRY INFORMATION						
Well Owner			Location of Well			
FULL NAME OF COMPANY, ORGANIZATION OR INDIVIDUAL BUREAU OF LAND MANAGEMENT			WELL LOCATION ADDRESS (IF KNOWN)			
MAILING ADDRESS 1763 PASEO SAN LUIS			TOWNSHIP (N/S) 20S	RANGE (E/W) 21E	SECTION 14	160 ACRE NW 1/4
CITY / STATE / ZIP SIERRA VISTA, AZ 85635			LATITUDE	LONGITUDE		40 ACRE SW 1/4
CONTACT PERSON NAME AND TITLE			LAND SURFACE ELEVATION AT WELL			
TELEPHONE NUMBER ()-439-6406			METHOD OF LATITUDE / LONGITUDE (CHECK ONE)			
FAX			<input type="checkbox"/> Hand-Held <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Conventional Survey <input type="checkbox"/> GPS <input type="checkbox"/> Survey-Grade			
WELL NAME			COUNTY ASSESSOR'S PARCEL ID NUMBER			
			BOOK 0	MAP 0	PARCEL	
			COUNTY WHERE WELL IS LOCATED Cochise			

COMPLETED 7/29/06

SECTION 3. WELL CONSTRUCTION DETAILS		
Drill Method	Method of Well Development	Method of Sealing at Reduction Points
CHECK ONE <input type="checkbox"/> Air Rotary <input type="checkbox"/> Bored or Augered <input type="checkbox"/> Cable Tool <input type="checkbox"/> Dual Rotary <input checked="" type="checkbox"/> Mud Rotary <input type="checkbox"/> Reverse Circulation <input type="checkbox"/> Driven <input type="checkbox"/> Jetted <input type="checkbox"/> Air Percussion / Odex Tubing <input type="checkbox"/> Other (please specify)	CHECK ONE <input checked="" type="checkbox"/> Airlift <input type="checkbox"/> Bail <input type="checkbox"/> Surge Back <input type="checkbox"/> Surge Pump <input type="checkbox"/> Other (please specify)	CHECK ONE <input type="checkbox"/> None <input checked="" type="checkbox"/> Packed <input type="checkbox"/> Swedged <input type="checkbox"/> Welded <input type="checkbox"/> Other (please specify)
	Condition of Well	Condition of Well
	CHECK ONE <input type="checkbox"/> Capped <input checked="" type="checkbox"/> Pump Installed	DATE WELL CONSTRUCTION STARTED 6/24/05
		DATE WELL CONSTRUCTION COMPLETED 6/29/05

I state that this notice is filed in compliance with A.R.S. §45-596 and is complete and correct to the best of my knowledge and belief.

DRILLING FIRM <i>FARWEST Pump Co</i>	SIGNATURE OF QUALIFYING PARTY <i>[Signature]</i>	DATE 7/29/05
---	---	-----------------

Well Driller Report and Well Log

WELL REGISTRATION NUMBER
55-207825

SECTION 4. WELL CONSTRUCTION DESIGN (AS BUILT) (attach additional page if needed)

DEPTH OF BORING <i>255'</i> Feet Below Land Surface	DEPTH OF COMPLETED WELL <i>255'</i> Feet Below Land Surface
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Water Level Information

STATIC WATER LEVEL <i>40'</i> Feet Below Land Surface	DATE MEASURED <i>6/29/05</i>	TIME MEASURED	IF FLOWING WELL, METHOD OF FLOW REGULATION <input type="checkbox"/> Valve <input type="checkbox"/> Other
---	---------------------------------	---------------	---

Borehole			Installed Casing													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE (X)			PERFORATION TYPE (X)					SLOT SIZE IF ANY (inches)		
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE		SLOTTED	IF OTHER TYPE, DESCRIBE
<i>0'</i>	<i>20'</i>	<i>15"</i>	<i>+1'</i>	<i>20'</i>	<i>10 3/4"</i>	<i>X</i>										
<i>20'</i>	<i>255'</i>	<i>10"</i>	<i>-4'</i>	<i>175'</i>	<i>6"</i>		<i>X</i>									
			<i>175'</i>	<i>255'</i>	<i>6"</i>		<i>X</i>				<i>X</i>					

Installed Annular Material												
DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (X)							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
<i>0'</i>	<i>20'</i>		<i>X</i>									
<i>20'</i>	<i>255'</i>									<i>X</i>		

Well Driller Report and Well Log

WELL REGISTRATION NUMBER
55- 207825

SECTION 6. WELL SITE PLAN

NAME OF WELL OWNER REAU OF LAND MANAGEMENT	COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK 0	MAP 0	PARCEL
---	--	-------	--------

- ◆ Please draw the following. (1) the boundaries of property on which the well was located; (2) the proposed well location; (3) the locations of all septic tank systems and sewer systems on the property or within 100 feet of the well location, even if on neighboring properties; and (4) any permanent structures on the property that may aid in locating the well
- ◆ Please indicate the distance between the well location and any septic tank system or sewer system.

1" = ____ ft

**ARIZONA DEPARTMENT OF WATER RESOURCES
WATER MANAGEMENT SUPPORT SECTION**

500 North Third Street
Phoenix, Arizona 85004

THIS AUTHORIZATION SHALL BE IN POSSESSION OF THE DRILLER DURING ALL DRILL OPERATIONS

WELL REGISTRATION NO: 55-207825 REPLACING WELL REGISTRATION NO: 55-623588

AUTHORIZED DRILLER: FARMERS PUMP CO. DBA FARWEST PUMP CO. INC. LICENSE NO: 307

NOTICE OF INTENTION TO REPLACE AN EXEMPT WELL(S) HAS BEEN FILED WITH THE DEPARTMENT BY:

WELL OWNER: BUREAU OF LAND MANAGEMENT 1763 PASEO SAN LUIS SIERRA VISTA, AZ 85635

THE WELL(S) IS/ARE TO BE LOCATED IN THE:

SW ¼ OF THE SW ¼ OF THE NW ¼ SECTION 14 TOWNSHIP 20 SOUTH RANGE 21 EAST

NO. OF WELLS IN THIS PROJECT: 1

THIS AUTHORIZATION EXPIRES AT MIDNIGHT ON THE 15TH DAY OF MAY, 2006



WATER MANAGEMENT SUPPORT

**THE DRILLER MUST FILE A LOG OF THE WELL
WITHIN 30 DAYS OF COMPLETION OF DRILLING**

ARIZONA DEPARTMENT OF WATER RESOURCES

500 North 3rd Street, Phoenix, Arizona 85004

Telephone (602) 417-2470

Fax (602) 417-2422



Janet Napolitano
Governor

Herb Guenther
Director

May 26, 2005

BUREAU OF LAND MANAGEMENT
1763 PASEO SAN LUIS
SIERRA VISTA, AZ 85635

Registration No 55-207825

File No D(20-21) 14 BCC

Dear Well Owner.

Enclosed is a copy of the Notice of Intention (NOI) to Replace a well that you recently filed with this Department pursuant to A.R.S. § 45-596. This is to inform you that the Department has approved the NOI and has mailed or otherwise provided a drilling card authorizing the drilling of the well to the well driller identified in the NOI. The driller may not begin drilling until he has received the drilling card, which must be displayed on the drill rig during drilling.

Well drilling activities must be completed within one year after the date the NOI was filed with the Department. If drilling is not completed within one year, you must file a new NOI before proceeding with further drilling. If in the course of drilling the well, it is determined that the well cannot be successfully completed as initially intended (dry hole, cave in, lost tools, etc.), the well must be properly abandoned and a Well Abandonment Completion Report must be filed as required by A.A.C. R12-15-816(F).

If you change drillers, you must notify the Department of the new driller's identity. Please ensure that the new driller is licensed by the Department to drill the type of well you require. A new driller may not begin drilling until he receives a new drilling card from the Department. If you are drilling a new or replacement well and it is necessary to change the location of the proposed well, you may not proceed with drilling until you file an amended NOI with the Department and the Department issues an amended drilling card to the driller. If county approval was required for the original well site plan (this applies to domestic wells on parcels that are five acres or less), you must submit a new well site plan with the new well location to your local county health authority for approval prior to filing the amended NOI with the Department.

A.R.S. § 45-600 requires the registered well owner to complete and file a Pump Installation Completion Report form (DWR form 55-56) within 30 days after the installation of pumping equipment. A form is enclosed for your use. Also enclosed is a well owner's guide that provides useful information and advice concerning your upcoming well construction project. A.R.S. § 45-600 also requires the driller to file a complete and accurate Well Drillers Report and Well Log (DWR form 55-55) within 30 days after completion of drilling. That form was mailed to your driller with the drilling card. You should insist and ensure that all of the required forms are accurately completed and timely filed with the Department.

Please be advised that A.R.S. § 45-593(C) requires the person to whom a well is registered to notify the Department of a change in ownership of the well and/or information pertaining to the physical characteristics of the well in order to keep this well registration file current and accurate. Any change in well information or a request to change well driller must be filed on a Request to Change Well Information form (DWR form 55-71A) that may be downloaded from the ADWR Internet website at <<http://www.water.az.gov/adwr/content/forms/default.htm#NOI>>.

Sincerely,

Tiffany Hancock
NOI Unit
Water Management Support Section

Enclosures



Arizona Department of Water Resources
 Water Management Support Section
 P O Box 458 • Phoenix, Arizona 85001-0458
 (602) 417-2470 • (800) 352-8488
 (602) 417-2422 fax www.water.az.gov

Notice of Intent to Drill, Deepen, Replace or Modify a Well
 (except a Non-Exempt Well in an Active Management Area)

\$150 or \$75 FEE

- Review instructions prior to completing form in black or blue ink
 - You must include with your Notice
 - Check or money order in the amount of the appropriate filing fee For a well located within an AMA or INA, the fee is \$150.00 For a well not located within an AMA or INA, the fee is \$75.00 if the well will be used solely for domestic purposes (see page 2 and instructions) and will have a pump with a maximum capacity of not more than 35 gallons per minute Otherwise, the fee is \$150.00
 - Authority for fee A.R.S. § 45-596
- ** PLEASE PRINT CLEARLY ** MAY 11 2005**

AMA/INA	B	SB
	76	
RECEIVED	DATE	WS
5/16/05		11
ISSUED	DATE	WDARF CERCLA
5/26/05		

FILE NUMBER
 0(20-21)14BCC
 WELL REGISTRATION NUMBER
 55 - 207835

SECTION 1. COUNTY OR LOCAL HEALTH AUTHORITY APPROVAL (if applicable)
If water from the proposed well will be used for domestic purposes on a parcel of land of 5 or fewer acres, the applicable county or local health authority must endorse all items in Section 1 within one year before submission to the Department of Water Resources You must also attach a site plan (pg. 3)

CHECK ONE

County or Local Health Authority Recommends Approval (pursuant to A.R.S. § 45-596 (G) and (F))

Field Inspection Performed

Site Plan Review Only

Insufficient Information to Make a Determination

COUNTY OR LOCAL AUTHORITY NAME AND TITLE

TELEPHONE NUMBER DATE

Official County or Local Seal or Stamp

COUNTY OR LOCAL AUTHORITY SIGNATURE

SECTION 2. REGISTRY INFORMATION

Well Type CHECK ONE	Proposed Action CHECK ONE	Location of Well WELL LOCATION ADDRESS (IF ANY)
<input checked="" type="checkbox"/> Exempt (Pump has a maximum capacity of not more than 35 gpm and water is not used for irrigation purposes inside an AMA) (See instructions)	<input type="checkbox"/> Drill New Well	<i>purchase 5/17/05</i>
<input type="checkbox"/> Non-Exempt (Pump has a maximum capacity of more than 35 gpm or water is used for irrigation purposes inside an AMA) (See instructions)	<input type="checkbox"/> Deepen	TOWNSHIP (N/S) RANGE (E/W) SECTION 180 ACRE 40 ACRE 10 ACRE
DESIGN PUMP CAPACITY 10 Gallons Per Minute	<input checked="" type="checkbox"/> Replace	22S 22E 614 SW 1/4 SW 1/4 NW 1/4
	<input type="checkbox"/> Modify	COUNTY ASSESSOR'S PARCEL ID NUMBER
	<i>If Deepening, Replacing or Modifying ORIGINAL WELL REGISTRATION NUMBER</i>	BOOK MAP PARCEL # OF ACRES per book 5/1
	55 - 623588	PLACE OF WATER USE (ONLY IF DIFFERENT FROM LOCATION OF WELL)
	MAXIMUM CAPACITY OF ORIGINAL WELL	TOWNSHIP (N/S) RANGE (E/W) SECTION 180 ACRE 40 ACRE 10 ACRE
	N/A Gallons Per Minute	1/4 1/4 1/4
	DISTANCE & DIRECTION FROM ORIGINAL WELL	COUNTY WHERE WELL IS LOCATED
	400 Feet NE	Cochise County

SECTION 3. OWNER INFORMATION

Well Owner FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL	Landowner (if different from Well Owner) FULL NAME OF COMPANY, GOVERNMENT AGENCY, OR INDIVIDUAL
Bureau of Land Management	
MAILING ADDRESS	MAILING ADDRESS
1763 Pasco San Luis	
CITY / STATE / ZIP CODE	CITY / STATE / ZIP CODE
Sierra Vista, AZ 85365-2240	
CONTACT PERSON NAME AND TITLE	CONTACT PERSON NAME AND TITLE
Mr. J.J. Swift	
TELEPHONE NUMBER FAX	TELEPHONE NUMBER FAX
520-439-6406	

SECTION 4.

Questions	Yes	No	If Yes:
1 Is the proposed well site within 100 feet of a septic tank system, sewer disposal area, landfill, hazardous materials or petroleum storage area or tank?		X	You must also request a variance (A.A.C. R12-15-818)
2 Is there another well name or identification number associated with this well?	X		PLEASE STATE 55-623588
3 Is the proposed well the second exempt well on this parcel for the same use?		X	If the proposed well is in an Active Management Area, you must also file a supplemental form 55-40A

Notice of Intent to Drill, Deepen, Replace or Modify a Well

WELL REGISTRATION NUMBER
55 - 207825

SECTION 5. DRILLING AUTHORIZATION SECTION 6. WATER / SITE INFORMATION

Drilling Firm		Principal Use of Water		Other Uses of Water	
NAME <i>Farwest Pump Company</i>		CHECK ONE		CHECK ALL THAT APPLY	
DWR LICENSE NUMBER <i>307</i>	ROC LICENSE CATEGORY <i>L-53 C-53 5/12/05 TH</i>	<input type="checkbox"/> Irrigation	<input type="checkbox"/> Utility	<input type="checkbox"/> Irrigation	<input type="checkbox"/> Utility
TELEPHONE NUMBER <i>520-293-9778</i>	FAX <i>520-293-7890</i>	<input type="checkbox"/> Commercial	<input checked="" type="checkbox"/> Domestic	<input type="checkbox"/> Commercial	<input type="checkbox"/> Domestic
MAILING ADDRESS <i>3230 W. El Caminodel Cerro</i>		<input type="checkbox"/> Municipal	<input type="checkbox"/> Industrial	<input type="checkbox"/> Municipal	<input type="checkbox"/> Industrial
CITY / STATE / ZIP CODE <i>Tucson, AZ 85745</i>		<input type="checkbox"/> Mining	<input type="checkbox"/> Stock	<input type="checkbox"/> Mining	<input checked="" type="checkbox"/> Stock
		<input type="checkbox"/> Recharge	<input type="checkbox"/> Dewatering	<input type="checkbox"/> Recharge	<input type="checkbox"/> Dewatering
		<input type="checkbox"/> Other (please specify)		<input type="checkbox"/> Other (please specify):	

MAY 11 2005

SECTION 7. PROPOSED WELL CONSTRUCTION DESIGN (attach separate sheet if needed) DATE CONSTRUCTION IS TO BEGIN
June, 2005

Borehole			Casing														
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE (T)				PERFORATION TYPE (T)					GROUTING MATERIAL		
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED		IF OTHER TYPE, DESCRIBE	
0	20'	16"	+1	20'	10 3/4	X*					X						Cement
20	250	10"	-4	230	10 3/4		X				X						
			230	250	10 3/4	X					X						

* ADWR well construction standards require a surface seal consisting of a minimum of 20 feet of steel casing. Cement grout must be used to fill the annular space between the surface casing and the borehole. (A.A.C. R12-15-811(B))

The Department's issuance of an authorization to drill a well is not a determination of whether water withdrawn from the well is legally surface water or groundwater. The legal nature of the water withdrawn from the well may be the subject of court action in the future as part of a determination of surface water rights in your area. If there are court proceedings that could affect your well, you will be notified and be given the opportunity to participate. If you have questions regarding the legal nature of the water to be withdrawn from your proposed well, please consult with an experienced civil engineer, hydrologist or water rights attorney.

For the purposes of determining appropriate fees outside AMAs or INAs, "domestic purposes" is defined as "uses related to the supply, service and activities of households and private residences and includes the application of water to less than 2 acres of land to produce plants or parts of plants for sale or human consumption, or for use as feed for livestock, range livestock or poultry, as such terms are defined in A.R.S. § 3-1201."

I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the best of my knowledge and belief.

TYPE OR PRINT NAME AND TITLE <i>Bill Childers, NC Manager</i>	
SIGNATURE OF WELL OWNER <i>Bill Childers</i>	DATE <i>5/9/05</i>
SIGNATURE OF LANDOWNER, IF APPLICABLE (SEE INSTRUCTIONS) <i>Bill Childers</i>	DATE <i>5/9/05</i>



Arizona Department of Water Resources
 Water Management Support Section
 P O. Box 458 • Phoenix, Arizona 85001-0458
 (602) 417-2470 • (800) 352-8488
 (602) 417-2422 fax www.water.az.gov

**Notice of Intent to
 Drill, Deepen, Replace or Modify a Well**
 (except a Non-Exempt Well in an Active Management Area)

\$150 or
 \$75 FEE

- ❖ Review instructions prior to completing form in black or blue ink
- ❖ You must include with your Notice:
 - Check or money order in the amount of the appropriate filing fee For a well located within an AMA or INA, the fee is \$150.00 For a well not located within an AMA or INA, the fee is \$75.00 If the well will be used solely for domestic purposes (see page 2 and instructions) and will have a pump with a maximum capacity of not more than 35 gallons per minute. Otherwise, the fee is \$150.00
 - Authority for fee: A.R.S. § 45-596

AMA/INA	B	76	SB
RECEIVED	DATE	WS	11
5/11/05			
ISSUED	DATE	WQARF	CERCLA

FILE NUMBER
 0(2222)6CCB
 WELL REGISTRATION NUMBER
 55 - 207825

** PLEASE PRINT CLEARLY ** MAY 11 2005

SECTION 1. COUNTY OR LOCAL HEALTH AUTHORITY APPROVAL (if applicable)
 If water from the proposed well will be used for domestic purposes on a parcel of land of 5 or fewer acres, the applicable county or local health authority must endorse all items in Section 1 within one year before submission to the Department of Water Resources You must also attach a site plan (pg. 3)

CHECK ONE

County or Local Health Authority Recommends Approval (pursuant to A.R.S. § 45-596 (G) and (F))

Field Inspection Performed

Site Plan Review Only

Insufficient Information to Make a Determination

COUNTY OR LOCAL AUTHORITY NAME AND TITLE

TELEPHONE NUMBER DATE

Official County or Local Seal or Stamp

COUNTY OR LOCAL AUTHORITY SIGNATURE

SECTION 2. REGISTRY INFORMATION

Well Type CHECK ONE	Proposed Action CHECK ONE	Location of Well WELL LOCATION ADDRESS (IF ANY)
<input checked="" type="checkbox"/> Exempt (Pump has a maximum capacity of not more than 35 gpm and water is not used for irrigation purposes inside an AMA.) (See instructions)	<input type="checkbox"/> Drill New Well <input type="checkbox"/> Deepen <input checked="" type="checkbox"/> Replace <input type="checkbox"/> Modify If Deepening, Replacing or Modifying	TOWNSHIP (N/S) RANGE (E/W) SECTION 160 ACRE 40 ACRE 10 ACRE 22S 22E 6 SW 1/4 SW 1/4 NW 1/4
<input type="checkbox"/> Non-Exempt (Pump has a maximum capacity of more than 35 gpm or water is used for irrigation purposes inside an AMA.) (See instructions)	ORIGINAL WELL REGISTRATION NUMBER 55 - 623588	COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL # OF ACRES
DESIGN PUMP CAPACITY 10 Gallons Per Minute	MAXIMUM CAPACITY OF ORIGINAL WELL N/A Gallons Per Minute	PLACE OF WATER USE (ONLY IF DIFFERENT FROM LOCATION OF WELL) TOWNSHIP (N/S) RANGE (E/W) SECTION 160 ACRE 40 ACRE 10 ACRE 1/4 1/4 1/4
DISTANCE & DIRECTION FROM ORIGINAL WELL 400 Feet NE		COUNTY WHERE WELL IS LOCATED Cochise County

SECTION 3. OWNER INFORMATION

Well Owner FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL	Landowner (if different from Well Owner) FULL NAME OF COMPANY, GOVERNMENT AGENCY, OR INDIVIDUAL
Bureau of Land Management	
MAILING ADDRESS 1763 Pasco San Luis	MAILING ADDRESS
CITY / STATE / ZIP CODE Sierra Vista, AZ 85365-2240	CITY / STATE / ZIP CODE
CONTACT PERSON NAME AND TITLE Mr. J.J. Swift	CONTACT PERSON NAME AND TITLE
TELEPHONE NUMBER FAX	TELEPHONE NUMBER FAX

FARWEST PUMP COMPANY
 PH. 520-293-9778
 3230 W EL CAMINO DEL CERRO
 TUCSON, AZ 85745

202
 91682/1221

DATE 5/13/05

PAY TO THE ORDER OF

ADWR

\$ 75.00

Seventy Five dollars & 00/100

DOLLARS



Arizona Department of Water Resources
 P. O. Box 458
 (602) 417-2470
 (602) 417-2422
 waterresources@water.az.gov

Notice of Intent to Drill, Deepen, Replace or Modify a Well
 (except a Non-Exempt Well in an Active Management Area)

\$150 or \$75 FEE

- Review instructions prior to...
- You must include with your...
- Check or money order for...
- a well located within an AMA...
- not located within an AMA...
- used solely for domestic purposes...
- will have a pump with a capacity...
- gallons per minute (gpm)...
- Authority for this A.R.S....
- ** PLEASE PRINT CLEARLY **

blue ink.
 drilling fee For...
 For a well...
 well will be...
 (instructions) and...
 than 35

AMA / INA	B	SB
RECEIVED	DATE	WS
ISSUED	DATE	WQARF CERCLA

FILE NUMBER
 WELL REGISTRATION NUMBER
 55 - 107525

SECTION 1. AUTHORITY APPROVAL (if applicable)
 If water from this proposed well is used on a parcel of land of 5 or fewer acres, the applicable county or local health authority must endorse all permits in Section 1.

CHECK ONE

County or Local Health Authority Approval (pursuant to A.R.S. § 45-1501)

Field Inspection Permit

Site Plan Review Order

Insufficient Information to Make Decision

COUNTY OR LOCAL AUTHORITY NAME

TELEPHONE NUMBER

COUNTY OR LOCAL AUTHORITY SIGNATURE

SECTION 2. REGISTRY INFORMATION

Well Type CHECK ONE	Project Type CHECK ONE	Location of Well WELL LOCATION ADDRESS (IF ANY)
<input checked="" type="checkbox"/> Exempt (Pump has a maximum capacity of not more than 35 gpm and water is not used for irrigation purposes inside an AMA.) (See instructions.)	<input type="checkbox"/> Drill <input type="checkbox"/> Deepen <input checked="" type="checkbox"/> Replace <input type="checkbox"/> Modify	TOWNSHIP (N/S) RANGE (E/W) SECTION 160 ACRE 40 ACRE 10 ACRE 22S 22E 6 SW 1/4 SW 1/4 NW 1/4
<input type="checkbox"/> Non-Exempt (Pump has a maximum capacity of more than 35 gpm or water is used for irrigation purposes inside an AMA.) (See instructions.)	<input type="checkbox"/> Original Well <input type="checkbox"/> Original Well If Deepening or Modifying, ORIGINAL WELL REGISTRATION NUMBER	COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL # OF ACRES
DESIGN PUMP CAPACITY 10 Gallons Per Minute	MAXIMUM CAPACITY N/A GALLONS PER MINUTE	PLACE OF WATER USE (ONLY IF DIFFERENT FROM LOCATION OF WELL) TOWNSHIP (N/S) RANGE (E/W) SECTION 160 ACRE 40 ACRE 10 ACRE 1/4 1/4 1/4
DISTANCE & DIRECTION TO ORIGINAL WELL 400+ ft E		COUNTY WHERE WELL IS LOCATED Cochise County

SECTION 3. OWNER INFORMATION

Well Owner FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL	Landowner (if different from Well Owner) FULL NAME OF COMPANY, GOVERNMENT AGENCY, OR INDIVIDUAL
Bureau of Land Management	
MAILING ADDRESS	MAILING ADDRESS
1763 Pasco San Luis	
CITY / STATE / ZIP CODE	CITY / STATE / ZIP CODE
Sierra Vista AZ 85365-2240	
CONTACT PERSON NAME AND TITLE	CONTACT PERSON NAME AND TITLE
Mr. J. J. Swift	
TELEPHONE NUMBER	TELEPHONE NUMBER
	FAX

FARWEST PUMP COMPANY
 PH 520-293-9778
 3230 W. EL CAMINO DEL CERRO
 TUCSON, AZ 85745

DATE: 5/10/05

PAY TO THE ORDER OF: ADWR

\$ 75.00

199

91-582/12