



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**

MAR 13 2008

FILE NUMBER
D(20-21) 3 DDB
 WELL REGISTRATION NUMBER
55- 207826
 PERMIT NUMBER (IF ISSUED)

* 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 **

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) 2DS	RANGE (E/W) 21E	SECTION 3	180 ACRE SE 1/4	40 ACRE SE 1/4	10 ACRE NW 1/4
CITY / STATE / ZIP SIERRA VISTA, AZ 85365	LATITUDE		LONGITUDE			
CONTACT PERSON NAME AND TITLE	LAND SURFACE ELEVATION AT WELL					
TELEPHONE NUMBER 1-439-6406	FAX	METHOD OF LATITUDE / LONGITUDE (CHECK ONE)				Feet Above Sea Level
WELL NAME	<input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Conventional Survey <input type="checkbox"/> GPS <input type="checkbox"/> Survey-Grade				<input type="checkbox"/> Hand-Held	
COUNTY ASSESSOR'S PARCEL ID NUMBER		COUNTY WHERE WELL IS LOCATED				
BOOK MAP PARCEL		Cochise				

SECTION 3. WELL CONSTRUCTION DETAILS

Drill Method	Method of Well Development	Method of Sealing at Reduction Points
CHECK ONE <input checked="" 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 7/11/05
		DATE WELL CONSTRUCTION COMPLETED 7/18/05

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 Farwest Pump Co.	SIGNATURE OF QUALIFYING PARTY <i>[Signature]</i>	DATE 8/15/05
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Well Driller Report and Well Log

WELL REGISTRATION NUMBER
55-207826

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

DEPTH OF BORING 305' Feet Below Land Surface	DEPTH OF COMPLETED WELL 305' Feet Below Land Surface
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Water Level Information			
STATIC WATER LEVEL 200' Feet Below Land Surface	DATE MEASURED 7/18/05	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
0'	20'	15"	+1	20'	10 3/4"	X				X						
20'	305'	10"	-4	225'	6 7/8"		X			X						
				225'	305'		X				X					

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				
0'	20'	X									
20'	305'								X		

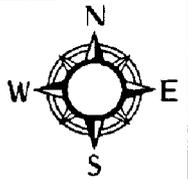
Well Driller Report and Well Log

WELL REGISTRATION NUMBER
55- 207826

SECTION 6. WELL SITE PLAN

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

- ◆ 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

Large empty rectangular area for drawing the well site plan.

**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: 55-207826

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

NOTICE OF INTENTION TO DRILL 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:

NW 1/4 OF THE SE 1/4 OF THE SE 1/4 SECTION 3 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

May 23, 2005



Janet Napolitano
Governor

Herb Guenther
Director

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

Registration No 55-207826

File No. D(20-21) 3 DDB

Dear Well Owner

Enclosed is a copy of the Notice of Intention (NOI) to Drill 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,

Lori Cason
NOI Unit
Water Management Support Section

Enclosures

FCSPRNCA2320



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. **MAY 11 2005**
- ** PLEASE PRINT CLEARLY ****

AMA / INA	B	SB
RECEIVED	DATE	WS
5/16/05		11
ISSUED	DATE	WQARF CERCLA
5/17/05		

FILE NUMBER
0 (20-21) 300B
 WELL REGISTRATION NUMBER
55-207826

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 COUNTY OR LOCAL AUTHORITY SIGNATURE

Official County or Local Seal or Stamp

SECTION 2. REGISTRY INFORMATION

Well Type	Proposed Action	Location of Well
CHECK ONE	CHECK ONE	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	TOWNSHIP (N/S) RANGE (E/W) SECTION 160 ACRE 40 ACRE 10 ACRE
<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)	If Deepening, Replacing or Modifying ORIGINAL WELL REGISTRATION NUMBER	COUNTY ASSESSOR'S PARCEL ID NUMBER
DESIGN PUMP CAPACITY	"MAXIMUM CAPACITY" OF ORIGINAL WELL	BOOK MAP PARCEL # OF ACRES
10 Gallons Per Minute	UNKNOWN Gallons Per Minute	PLACE OF WATER USE (ONLY IF DIFFERENT FROM LOCATION OF WELL)
	DISTANCE & DIRECTION FROM ORIGINAL WELL	TOWNSHIP (N/S) RANGE (E/W) SECTION 160 ACRE 40 ACRE 10 ACRE
	100 Feet NORTH	COUNTY WHERE WELL IS LOCATED
		Cochise County

Per drilled 5/12/05
in the house per. app.

SECTION 3. OWNER INFORMATION

Well Owner	Landowner (if different from Well Owner)
FULL NAME OF COMPANY, ORGANIZATION OR INDIVIDUAL	FULL NAME OF COMPANY, GOVERNMENT AGENCY, OR INDIVIDUAL
Bureau of Land Management	
MAILING ADDRESS	MAILING ADDRESS
1763 Paseo 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
520-439-6406	
FAX	FAX

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 55-623602
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 - 207826

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>	DOC LICENSE CATEGORY <i>L-53</i>	<input type="checkbox"/> Irrigation	<input type="checkbox"/> Irrigation	<input type="checkbox"/> Utility	<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"/> Municipal	<input type="checkbox"/> Municipal	<input type="checkbox"/> Municipal
CITY / STATE / ZIP CODE <i>Tucson, AZ 85745</i>		<input type="checkbox"/> Industrial	<input type="checkbox"/> Industrial	<input type="checkbox"/> Industrial	<input type="checkbox"/> Industrial
		<input type="checkbox"/> Mining	<input type="checkbox"/> Mining	<input type="checkbox"/> Mining	<input type="checkbox"/> Mining
		<input type="checkbox"/> Stock	<input type="checkbox"/> Stock	<input checked="" type="checkbox"/> Stock	<input checked="" type="checkbox"/> Stock
		<input type="checkbox"/> Recharge	<input type="checkbox"/> Recharge	<input type="checkbox"/> Recharge	<input type="checkbox"/> Recharge
		<input type="checkbox"/> Dewatering	<input type="checkbox"/> Dewatering	<input type="checkbox"/> Dewatering	<input type="checkbox"/> Dewatering
		<input type="checkbox"/> Other (please specify)			

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	15"	+1	20'	10 3/4	X*				X							Cement
20	300	10"	-4	280	6 5/8	X				X							
			280	300	6 5/8	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 Childress, NCA Manager</i>	
SIGNATURE OF WELL OWNER <i>[Signature]</i>	DATE <i>5/9/05</i>
SIGNATURE OF LANDOWNER, IF APPLICABLE (SEE INSTRUCTIONS) <i>[Signature]</i>	DATE <i>5/9/05</i>



Arizona Department of Water Resources
 Support Section
 Phoenix, Arizona 85001-0458
 (602) 352-8488
 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 this form in black or blue ink
- Pay the appropriate filing fee. For a well with a design pump capacity of not more than 35 gpm, the fee is \$150.00. For a well with a design pump capacity of more than 35 gpm, the fee is \$75.00 if the well will be used for irrigation purposes (page 2 and instructions) and \$150.00 if the well will be used for other purposes.

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

FILE NUMBER
 0 (20-21) 300C
 WELL REGISTRATION NUMBER
 55-207826

HEALTH AUTHORITY APPROVAL (if applicable)
 For domestic purposes on a parcel of land of 5 or fewer acres, the applicable county or local health authority must approve the well at least 30 days before submission to the Department of Water Resources. You must also attach a site plan (pg. 3).

Official County or Local Seal or Stamp

COMMENDS APPROVAL (F)

TERMINATION

COUNTY OR LOCAL AUTHORITY SIGNATURE

TELEPHONE NUMBER

SECTION 2: REGISTRATION

Well Type
 CHECK ONE

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)

Non-Exempt
 (Pump has a maximum capacity of more than 35 gpm or water is used for irrigation purposes inside an AMA.) (See instructions)

DESIGN PUMP CAPACITY: 10 Gallons Per Minute

Action: New Well

Location of Well
 WELL LOCATION ADDRESS (IF ANY)

TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE
20S	21E	3	SE 1/4	SE 1/4	SW 1/4 NW

COUNTY ASSESSOR'S PARCEL ID NUMBER
 BOOK: MAP: PARCEL: # OF ACRES: 5/2/05

PLACEMENT OF WELL (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

COUNTY WHERE WELL IS LOCATED: Cochise County

SECTION 3: OWNERSHIP

Well Owner
 FULL NAME OF COMPANY, GOVERNMENT AGENCY, OR INDIVIDUAL
 Bureau of Agricultural Management

Mailing Address
 1763 Pasadita

CITY / STATE / ZIP CODE
 Sierra Vista, AZ 865-2240

CONTACT PERSON NAME AND TITLE
 Mr. J. J. [Name]

TELEPHONE NUMBER

Landowner (if different from Well Owner)
 FULL NAME OF COMPANY, GOVERNMENT AGENCY, OR INDIVIDUAL

Mailing Address

CITY / STATE / ZIP CODE

CONTACT PERSON NAME AND TITLE

TELEPHONE NUMBER FAX

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

2020
 91582/1221

DATE 5/13/05

PAY TO THE ORDER OF ADWR \$ 75.00
Seventy-five Dollars DOLLARS



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 **MAY 11 2006**
- ** PLEASE PRINT CLEARLY ****

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

FILE NUMBER
WELL REGISTRATION NUMBER
55 - DC 7526

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		Official County or Local Seal or Stamp
<input type="checkbox"/> County or Local Health Authority Recommends Approval (pursuant to A.R.S. § 45-596 (G) and (F)) <input type="checkbox"/> Field Inspection Performed <input type="checkbox"/> Site Plan Review Only <input type="checkbox"/> Insufficient Information to Make a Determination		
COUNTY OR LOCAL AUTHORITY NAME AND TITLE		COUNTY OR LOCAL AUTHORITY SIGNATURE
TELEPHONE NUMBER	DATE	

SECTION 2. REGISTRY INFORMATION

Well Type CHECK ONE <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"/> Non-Exempt (Pump has a maximum capacity of more than 35 gpm or water is used for irrigation purposes inside an AMA) (See instructions)	Proposed Action CHECK ONE <input type="checkbox"/> Drill New Well <input checked="" type="checkbox"/> Deepen <input checked="" type="checkbox"/> Replace <input type="checkbox"/> Modify <i>If Deepening, Replacing or Modifying</i> ORIGINAL WELL REGISTRATION NUMBER 55 - 623602 MAXIMUM CAPACITY OF ORIGINAL WELL UNKNOWN Gallons Per Minute	Location of Well WELL LOCATION ADDRESS (IF ANY) TOWNSHIP (N/S) RANGE (E/W) SECTION 160 ACRE 40 ACRE 10 ACRE 20S 21E 3 SE 1/4 SE 1/4 SW 1/4 COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL # OF ACRES 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
DESIGN PUMP CAPACITY 10 Gallons Per Minute	DISTANCE & DIRECTION FROM ORIGINAL WELL 100 Feet NORTH	COUNTY WHERE WELL IS LOCATED Cochise County

SECTION 3. OWNER INFORMATION

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

FARWEST PUMP COMPANY PH 520-293-8778 3230 W EL CAMINO DEL CERRO TUCSON, AZ 85746	1993 DATE 5/10/05 91-582/1221
PAY TO THE ORDER OF ADWR	\$ 75.00