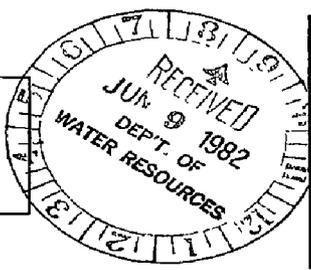


DEPARTMENT OF WATER RESOURCES
 39 EAST VIRGINIA AVENUE
 PHOENIX, ARIZONA 85004

REGISTRATION OF EXISTING WELLS

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

<p>REGISTRATION FEE (CHECK ONE)</p> <p>EXEMPT WELL (NO CHARGE) <input type="checkbox"/></p> <p>NON-EXEMPT WELL -- \$10.00 <input checked="" type="checkbox"/></p>	<p style="text-align: center;">FOR OFFICE USE ONLY</p> <p>REGISTRATION NO. 55- <u>623606</u></p> <p>FILE NO <u>D(23-22)16ACC</u></p> <p>FILED <u>6-9-82</u> AT <u>8:58am</u></p> <p style="text-align: center;">(DATE) (TIME)</p> <p>INA _____</p> <p>AMA _____</p>
---	---



1. Name of Registrant: Tenneco West Inc.
2700 Fry Blvd., Suite B-8, Sierra Vista, AZ. 85635
(Address) (City) (State) (Zip)

2. File and/or Control Number under previous groundwater law:
(23-22) 16 ACC 35
(File Number) (Control Number)

3. a. The well is located within the SW $\frac{1}{4}$ SW $\frac{1}{4}$ NE $\frac{1}{4}$, Section 16,
 of Township 23 'S, Range 22 E/, 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)
Domestic Cobb House L

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

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 N/A feet
 b. Diameter of casing _____ inches
 c. Depth of casing _____ feet
 d. Type of casing _____
 e. Maximum pump capacity _____ gallons per minute.
 f. Depth to water _____ feet below land surface.
 g. Date well completed Approx. 1967
(Month) (Day) (Year)

8. The place(s) of use of water If same as Item 3, check this box
_____ $\frac{1}{4}$ _____ $\frac{1}{4}$ _____ $\frac{1}{4}$, Section _____ Township _____ Range _____
_____ $\frac{1}{4}$ _____ $\frac{1}{4}$ _____ $\frac{1}{4}$, Section _____ Township _____ Range _____

Attach additional sheet if necessary.

9. DATE 5/14/82 SIGNATURE OF REGISTRANT Melvin Jones

ARIZONA DEPARTMENT OF WATER RESOURCES
OPERATIONS DIVISION
15 SOUTH 15TH AVENUE
PHOENIX, ARIZONA 85007

NOV - 9 1990

CHANGE OF WELL INFORMATION

Well Registration No. 55- 623606 File No. D(23-22)16 acc
(location)

I/We request the following well information be changed: _____

Date: _____ Signature of Current Well Owner _____

(DO NOT CUT THIS FORM IN HALF)

STATEMENT OF CHANGE OF WELL OWNERSHIP

I, Tenneco West, Inc., state that I am (no longer) the ~~XXXX~~
(please print) owner of the well described below:

Township 23S Range 22E Section 16; SW $\frac{1}{4}$ SW $\frac{1}{4}$ NE $\frac{1}{4}$

Well Registration No. 55- 623606 File No. D(23-22)16 acc
(location)

Tenneco West, Inc. BLM - Safford District
PRINT Previous Owner's Name PRINT New Owner's Name

P.O. Box 9380 425 E. 4th Street
Address Address

Bakersfield | CA | 93389 | Safford | AZ | 85546
City State Zip City State Zip

Dated: 11/02/90 Signature of New Owner Ben Joneli for BLM

MICROFILMED

NOTE: A.R.S. §45-593.C. requires that the Department be notified of change of well ownership and that the well owner is required to keep the Department's Well Registration records current and accurate. Well data and ownership changes must be submitted within thirty (30) days after changes take place.

SAVE THIS FORM TO REPORT FUTURE CHANGES IN OWNERSHIP, CHANGES IN ADDRESS, OR CHANGE IN WELL DATA SUCH AS PUMP CAPACITY, CORRECTION OF LEGAL DESCRIPTION, CHANGE OF WELL DRILLER AND AVENDING INFORMATION PREVIOUSLY FILED.

ENTERED NOV 14 1990

Publications who send you mail.

For publications, tape an old address label over name and old address sections and complete new address

Your Name		BLM Safford Dist.						
Old Address	No. &	435 E 4th St.			Rural Box No.			
	City	Safford, AZ 85546						
New Address	No. &	BUREAU OF LAND MANAGEMENT SAFFORD DISTRICT OFFICE		Apt./Suite No.	PO Box	RR No.	Rural Box No.	
	City	711 14th AVENUE SAFFORD, ARIZONA 85546		State	ZIP+4			
Sign Here		C. B.		Date new address in effect	12/3/92			Keyline No. (if any)

PS Form 3576, August 1989

RECEIVER Be sure to record the above new address.

D(23-22) 16 ACC
623606

ENTERED OCT 26 1993

MICROFILMED

TENNeco REALTY DEVELOPMENT CORP.
 STOCKDALE DEVELOPMENT DIVISION
 PUEBLO DEL SOL
 2700 FRY BLVD SUITE B-8
 SIERRA VISTA AZ 85635

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

ALSO: TENNeco WEST INC. & BOQUILLAS CATTLE CO.

(57)

RECEIPT

KIND ENTRY	FILE REFERENCE NO.
55	623584
	THRU
55	523640

FUND SOURCE	ACCOUNT NO.			INT. ACCT.	ITEM DESCRIPTION	RATE	\$ AMOUNT
	AGENCY	CHAPTER	DIV.				
					Filing Fee for Registration of Existing Wells	10.00	570.00
					File Numbers:		
					Tenneco West Inc. D(22-22)17 bcd D(17-20)26 aac		
					D(20-21)10 ccd Various Others		
					Tenneco Realty Dev. D(22-20)13 aca Boquillas Cattle Co. D(18-21)33 cb		
					B(24-8)9 ddd		
					B(27-6)12 bab		
					B(27-6)12 bad		
					B(27-6)12 bad		
						NET PAYMENT	
						CLETS 57	
						CHK NO 2814	
						570. 10.00	
						55-1 570.00	
						TAX 9.00	
						TOTAL 570.00	
						GEN.CHEK 570.00	

10/19/2 30

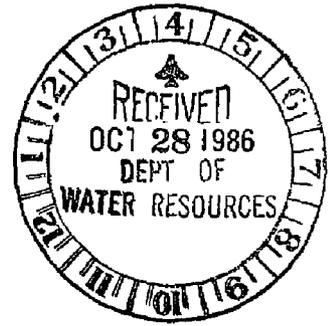
Check No. 2814

TOTAL

\$ 570.00

MICROFILMED

DEPARTMENT OF WATER RESOURCES
99 East Virginia Avenue
Suite 100
Phoenix, Arizona 85004
CHANGE OF WELL INFORMATION



Registration Number 55- 623606

I request the following information be changed in Well File Number _____

TENNECO WEST, INC.

Date OCT 10 1986, 19 _____
Signature of Well Owner *Milvin Jans* SENIOR VICE PRESIDENT

STATEMENT OF CHANGE OF WELL OWNERSHIP

I, Tenneco West, Inc., state that I am (no longer) the
(~~the~~) owner of the well described below:

Township 23S Range 22E Section 16, SW $\frac{1}{4}$ SW $\frac{1}{4}$ NE $\frac{1}{4}$
Registration #55- 623606 File No. D(23-22)16 acc

Tenneco West, Inc.
Previous Owner

Arizona White Tank Associates
New Owner

P.O. Box 9380
Address

8300 North Hayden Road, Suite 204
Address

Bakersfield, Calif. 93309
City State Zip

Scottsdale, Arizona 85258
City State Zip

NOTE: ARS §45-593 requires that the Department be notified of change of well ownership and that the well owner is required to keep the Department's Well Registration records current and accurate. Well data and ownership changes must be submitted within 30 days after changes take place.

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

ENTERED OCT 29 1986

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

CHANGE OF WELL INFORMATION



Registration Number 55- 623606

I request the following information be changed in Well File Number D (23-22) 16acc

Date _____, 19____ Signature of Well Owner _____

STATEMENT OF CHANGE OF WELL OWNERSHIP

I, Delbert Molitor for BLM, state that I am (~~no longer~~) the (new) owner of the well described below:

Township 23S Range 22E Section 16, SW 1/4 SW 1/4 NE 1/4

Registration #55- 623606 File No. _____

Tenneco West, Inc
Previous Owner

Bureau of Land Management
New Owner Safford District

PO Box 9380
Address

425 E 4th St
Address

Bakersfield Calif 93309
City State Zip

Safford Arizona 85546
City State Zip

NOTE: ARS §45-593 requires that the Department be notified of change of well ownership and that the well owner is required to keep the Department's Well Registration records current and accurate. Well data and ownership changes must be submitted within 30 days after changes take place.

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

ENTERED MAR 05 1987