

ARIZONA DEPARTMENT OF WATER RESOURCES
Water Management Division
3550 North Central Ave, 2nd Floor
Phoenix, Arizona 85012-2105
Phone (602) 771-8585 Fax (602) 771-8689

APPLICATION FOR GROUNDWATER SAVINGS FACILITY PERMIT (§ 45-812.01)

The initial fee for a Groundwater Savings Facility Permit Application is \$1,000. Total fees for this application are based upon an hourly billable rate, which can be found on the ADWR web site @www.azwater.gov. If the costs of reviewing your application exceed \$1,000, you will be invoiced for the difference, up to a maximum total fee of \$10,000. Payment may be made by cash, check, or credit card, (if you wish to pay by credit card, please contact the Recharge Program at 602-771-8599). Checks should be made payable to the Arizona Department of Water Resources. In addition to the hourly application fee, the applicant must pay any review-related costs associated with the application and the actual cost of mailing or publishing any legal notice of the application or any notice of a pre-decision administrative hearing on the application. Review related costs are: (1) costs associated with a pre-decision hearing on the application, such as court reporter services and facility rentals for the hearing, and (2) mileage expenses for a site visit conducted before issuing a decision on the application. Failure to enclose the initial application fee will cause the application to be returned. Fees for a Groundwater Savings Facility Permit Application are authorized by A.R.S. § 45-871.01 and A.A.C. R12-15-103.

FOR OFFICE USE ONLY
Application No.: <u>72-538133.0005</u>
Date Received: <u>9-19-2014</u>

PLEASE SUBMIT ONE ORIGINAL AND ONE COPY OF THE COMPLETED APPLICATION AND ALL SUPPORTING MATERIALS.

GENERAL INFORMATION

- Name of Applicant: BKW Farms, Inc.
P.O. Box 638 Marana AZ 85653
Mailing Address City State Zip
 Facility Contact Person Brian Wong Telephone (520)682-2516 Fax (520)682-2517
- Name of Active Management Area or Irrigation Non-Expansion Area if applicable, and name of groundwater basin and subbasin where the facility will be located Tucson Active Management Area, Upper Santa Cruz Basin, Avra Valley Subbasin
- Name of the owner(s) of the land where the facility will be operated ASLD, Jon Post, BKW Farms
 Mailing Address See Exhibit A of Plan of Operations
(If more than one owner, attach a list showing corresponding land owner and well registration number(s)).
- Legal description of the location of the facility See Exhibit E of Plan of Operation, GSF Permit No. 72-538133 (quarter/quarter/quarter/section, township and range)
- Name of recipient(s) of in lieu water. Attach list if necessary. BKW Farms, Inc.

6. The maximum annual amount of water that may be stored at the facility 14,316.66 acre-feet per annum

7. Proposed duration of permit 5 years

8. Registration number(s) and location of well(s) from which groundwater withdrawals will be curtailed.
(If more than two wells, attach an additional page)

55- 508395 Township 12S Range 11E Section 12 $\frac{1}{4}$ NE $\frac{1}{4}$ SE $\frac{1}{4}$ SE

55- 615830 Township 12S Range 11E Section 7 $\frac{1}{4}$ NW $\frac{1}{4}$ SE $\frac{1}{4}$ SE

See Exhibit C in Plan of Operations

9. Please attach the following:

A. A detailed plan for proving the amount of annual groundwater savings. See Plan of Operation

B. Plan of operation for the facility that: (1) Describes the facility in detail; (2) Demonstrates direct reduction of elimination of groundwater withdrawals resulting from the receipt of in lieu water; (3) Demonstrates that the substitute or in lieu water would not have been a reasonable alternative to the recipient without the project; (4) Demonstrates that the substitute or in lieu water was not delivered before 9/1/90; (5) Demonstrates that the substitute or in lieu water is the only reasonably available substitute for groundwater; (6) Describes the area of impact of the water storage.

NOTARIZED SIGNATURE

I (We), BKW Farms, Inc., the applicant(s) named in this application, do hereby certify under the penalty of perjury, that the information contained and statements made herein are to the best of my (our) knowledge and belief true, correct and complete.

(520)682-2516
Telephone

[Signature]
Signature of owner or authorized agent

President
Title

P.O. Box 638 Marana AZ 85653
Mailing Address City State Zip

STATE OF ARIZONA)
County of Pima) ss.

Subscribed and sworn to before me this 17th day of September, 20 14.

Laura J. Kmiec
Notary Public

February 3rd, 2015
My commission expires:

