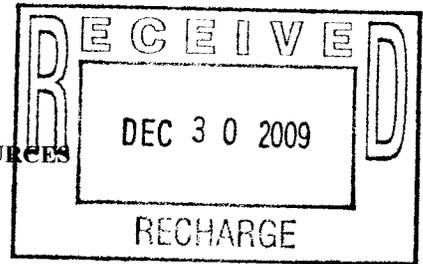


ARIZONA DEPARTMENT OF WATER RESOURCES
Water Management Division
3550 North Central Ave, 2nd Floor
Phoenix, Arizona 85012-2105
Phone (602) 771-8585 Fax (602) 771-8689



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

APPLICATION FEE IS \$ 500.00 DUE UPON FILING.

PERMIT FEE OF \$ 350.00, PLUS NOTICE AND PUBLICATION FEES TO BE DETERMINED, ARE ALSO DUE PRIOR TO ISSUANCE OF PERMIT.

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

FOR OFFICE USE ONLY
Application No.: 72-531381.0004
Date Received: 12-30-09

1. Name of Applicant: Maricopa-Stanfield Irrigation & Drainage District (MSIDD)
41630 W. Louis Johnson Drive Maricopa AZ 85138
Mailing Address City State Zip
Facility Contact Person Brian Betcher Telephone 520-424-3344 Fax 520-424-3281

2. 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 Pinal AMA: Maricopa-Stanfield Subbasin

3. Name of the owner(s) of the land where the facility will be operated Holder(s) of IGFR's listed in exhibit B of Groundwater Savings Facility Plan of Operation (GSF-P.O.)
Mailing Address n/a
(If more than one owner, attach a list showing corresponding land owner and well registration number(s)).

4. Legal description of the location of the facility See Exhibit A of GSF-PO
(quarter/quarter/quarter/section, township and range)

5. Name of recipient(s) of in lieu water. Attach list if necessary. Holder(s) or lessors of IGFR's listed in Exhibit B of GSF-PO

6. The maximum annual amount of water that may be stored at the facility 120,000 A.F.

7. Proposed duration of permit 10 years or until December 31, 2019

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) See Exhibit B of GSF-PO

55- _____ Township _____ Range _____ Section _____ 1/4 _____ 1/4 _____ 1/4 _____
55- _____ Township _____ Range _____ Section _____ 1/4 _____ 1/4 _____ 1/4 _____

9. Please attach the following:

- A. A detailed plan for proving the amount of annual groundwater savings.
- 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.

I (We), MSIDD, 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.

520-424-3344
Telephone

Juan M. Betcher
Signature of owner or authorized agent

General Manager
Title

41630 W. Louis Johnson Dr. Maricopa AZ 85138
Mailing Address City State Zip

STATE OF ARIZONA)
County of Pinal) ss.

Subscribed and sworn to before me this 30th day of December, 2009.

Nancy A. Messer
Notary Public

June 8, 2010
My commission expires:

