

ARIZONA STATE LAND DEPARTMENT
1624 West Adams
Phoenix, Arizona 85007

STATEMENT OF CLAIMANT

(Leave Blank)

IN THE MATTER OF DETERMINATION OF)
RELATIVE RIGHTS TO THE USE OF)
WATERS OF THE SAN PEDRO RIVER AND ITS)
TRIBUTARY WATERSHED, INC. ARAVAIPA CK.)

File No. 39-8321
Filed: 12-29-81 at 9:45 AM
(date) (time)

The State Land Department has enclosed with the accompanying Notice this form on which claimant shall present as required, the particulars of his claim of right to the subject waters. All applicable portions must be completed. A separate Statement of Claimant must be submitted for each source or point of diversion of public water unless those waters are commingled prior to use. A map published by the United States Geological Survey or a map of equal standard shall be submitted with this Statement showing on the face of the map the particulars of point of diversion, place of use and other pertinent information.

(Print or type. If more space is required, use explanatory at end of form, or attachment.)

1. Name of Claimant: CORONADO NATIONAL FOREST
(Last) (First) (M.I.)

301 West Congress, Tucson, AZ 85701 (602) 792-6483
(Address, City, State, Zip) (Telephone No.)

2. State the nature of the right or use on which claim is based: (indicate, and attach supporting documentation)

- A. Right to surface water initiated by beneficial use prior to June 12, 1919. Indicate registry number if previously submitted under Water Rights Registration Act _____.
- B. Court Decreed Water Right. Cite Title and Date of Case _____ Cause No. _____ County _____.
- C. Application for Permit to Appropriate Water filed. State Land Department Application No. _____, Permit No. _____, Certificate of Water Right No. _____.
- D. Claim of Water Right for a Stockpond. State Land Department Application No. _____.
- E. Other. Describe: Reserved Right

3. A. Date of initiation of right: approx. 1959
(Month/Day/Year)

B. Date water first used for beneficial purposes: approx. 1959
(Month/Day/Year)

4. Purpose, annual amount and annual period of use:

Purpose	Amount	Month/Day	Month/Day
Irrigation	_____ ac.ft./gallons	From _____	to _____
Domestic	_____ ac.ft./gallons	From _____	to _____
Stockwater	_____ ac.ft./gallons	From _____	to _____
Municipal	_____ ac.ft./gallons	From _____	to _____
Power	_____ ac.ft./gallons	From _____	to _____
Mining	_____ ac.ft./gallons	From _____	to _____
Recreation	_____ ac.ft./gallons	From _____	to _____
Wildlife	_____ ac.ft./gallons	From _____	to _____
Other Uses	<u>50</u> _____ ac.ft./gallons	From <u>Jan 1</u>	to <u>Dec 31</u>

5. A. (1) If for irrigation purposes, describe place of use: (also indicate on map)
Township (N/S) Range (E/W) Section Legal Subdivision No. of Acres.

(2) If land reclaimed over period of years, indicate schedule and amount of land reclaimed first and each subsequent year(s): _____

5. A. (3) Indicate kind of crops cultivated: _____
 Character of soil: _____
- B. If for domestic purposes, number of persons: _____, or families: _____
- C. If for stockwater purposes, number and kind of stock watered: _____
- D. If for municipal purposes, population to be served, and estimate of future requirements: _____
- E. If for power purposes, describe type of plant and capacity: _____
- F. If for mining purposes, describe purpose of use, location and character of the mine(s) to be served: _____
- G. If for recreational purposes, describe: _____
- H. If for wildlife purposes, including fish, describe: _____

- I. If for other purposes, describe: Administration of National Forest including fire fighting, periodic domestic and stockwater use, and occasional irrigation use.
6. A. Direct source of public water diverted: Powers Garden Spring tributary to Rattlesnake Canyon on the San Pedro watershed.
- B. Point of Diversion (indicate on map): SE 1/4 NW 1/4, Section 13 Township 9S (N/S), Range 19E (E/W), Gila and Salt River Base and Meridian, County Graham. Ownership USA
- C. Place of use (indicate on map): SE 1/4 NW 1/4, Section 13 Township 9S (N/S), Range 19E (E/W), Gila and Salt River Base and Meridian, County Graham. Ownership USA

7. State all other sources of water supply not described in Question 6 of this form.
- A. Type of Source: Does Not Apply
- B. Location of Source (indicate on map): _____ 1/4 _____ 1/4, Section _____ Township _____ (N/S), Range _____ (E/W), Gila and Salt River Base and Meridian, County _____ Ownership _____
- C. If other source is well, list following:
- (1) Date well construction began: _____; Date well place in use: _____ (Month/Day/Year)
- (2) Location (10 acre subdivision) (indicate on map): _____ 1/4 _____ 1/4 _____ 1/4 Section _____, Township _____ (N/S), Range _____ (E/W), Gila and Salt River Base Meridian, County of _____.
- (3) State Land Department Intent to Drill, File No. _____, or Application for Permit No. _____.
- (4) State whether free flowing or pump: _____. If pump, list type of pump and capacity: _____
- (5) Casing depth _____ ft. Total well depth _____ ft. Diameter of casing _____ inches.
- (6) Depth to water: _____ ft. (Static Level)
- (7) Annual amount pumped, or otherwise extracted: _____ Ac.Ft./Gallons
- (8) State purpose of use: _____.
- (9) Indicate annual period of use: _____ (Month/Day) to _____ (Month/Day)

8. Water storage reservoir and/or diverting works:
- A. Location (indicate on map): SE 1/4 NW 1/4, Section 13, Township 9S (N/S), Range 19E (E/W), Gila and Salt River Base and Meridian, County Graham. Ownership USA
- B. Name of storage reservoir and/or diverting works (if known): Cow Camp Tank
- C. Maximum capacity: 0.07 Ac.Ft.
- D. Maximum depth of water: 5 ft.

- 8. E. (1) Year construction began: approx. 1959
- (2) Year construction completed approx 1959 .
- (3) Date water first stored: approx. 1959 (Month/Year).

F. If dam, list following:

- (1) Construction material: Does Not Apply
- (2) Maximum Length: Top _____ ft.; Bottom _____ ft.
- (3) Maximum Width: Top _____ ft.; Bottom _____ ft.
- (4) Maximum height: _____ ft.

G. If diverting works, describe: Does Not Apply

9. Distribution works:

A. If ditch or canal:

- (1) Date construction began: Does Not Apply
(Month/Day/Year)
Date construction completed: _____
(Month/Day/Year)
- (2) Length of ditch or canal to first place of use: _____ ft., total length of ditch or canal: _____ ft.
- (3) Top width: _____ ft.; Bottom width: _____ ft.
- (4) Grade (slope) of ditch: _____
- (5) If ditch or canal owned and/or operated by an association or company or such other entity, list name of association or company or such other entity: _____

B. If pipeline:

- (1) Type: _____ (i.e., aluminum, steel, etc.)
- (2) Diameter: _____ inches
- (3) Length of pipeline to first place of use: _____ ft. and total length of pipeline: _____ ft.
- (4) Grade (slope) of pipeline: _____

C. If other, describe: _____

10. Enlargement(s) of storage reservoir and/or diverting and/or distributing works

A. Date begun: Does Not Apply
(Month/Day/Year)

Date completed: _____
(Month/Day/Year)

B. Describe details of enlargement(s): _____

C. Dimensions of works as originally constructed and as enlarged: _____

Explanatory

Multiple horizontal lines for text entry.

(if more space is required, attach separate sheet(s))

STATE OF ARIZONA)
County of Pima) SS

VERIFICATION

USDA - CORONADO NATIONAL FOREST
(please print Claimant-Affiant's name)

[Signature]
(Claimant-Affiant representative's name)

being first duly sworn, deposes and says; That the affiant, or its duly authorized representative, possesses the knowledge and the authorization to execute this verification as to the correctness and truthfulness of the matters set forth in the "Statement of Claimant", except as to those matters alleged upon information and belief, and as to those matters believes them to be true and correct.

For Corporations, Partnerships, Associations, etc.

Claimant-affiant signature

Claimant-affiant representative's signature

Claimant-affiant signature

Attest: _____
Claimant-affiant representative's signature

Subscribed and sworn to before me this
28th day of April, 1980.

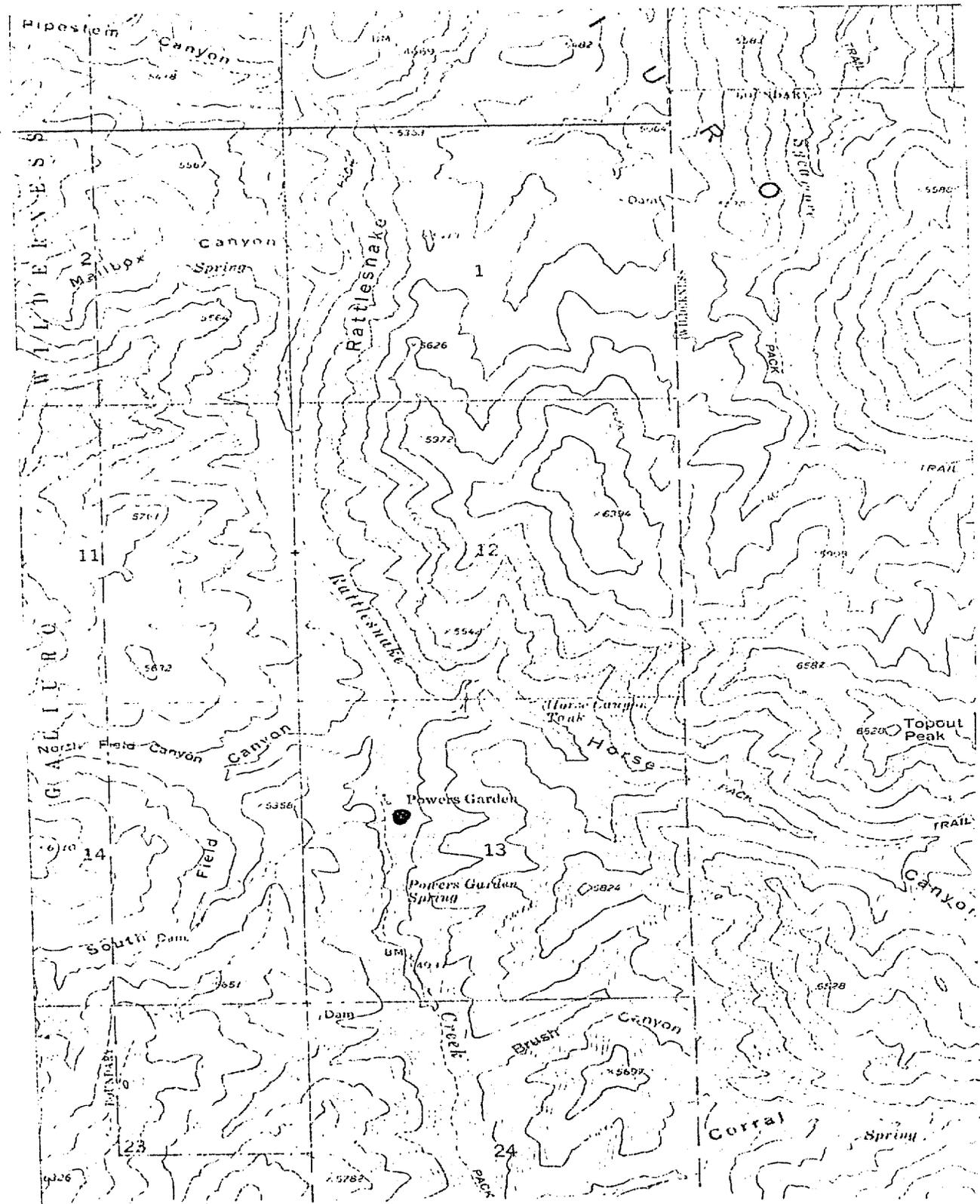
SEAL

Marquita A. McCrone
Notary Public or authorized Officer of the
State Land Department

My Commission expires April 1, 1983



T.85.
T.95.



R. 19E.

R. 20E

U S DEPARTMENT OF AGRICULTURE
 FOREST SERVICE
 REGION 3
 517 GOLD AVENUE, SW
 ALBUQUERQUE, NEW MEXICO 87102

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

RECEIPT

KIND ENTRY	FILE REFERENCE NO.
39	8029
	THRU
39	8378

FUND SOURCE	ACCOUNT NO.			INT. ACCT.	ITEM DESCRIPTION	RATE	\$ AMOUNT
	AGENCY	CHAPTER	DIV.				
14	432	36		1	Adjudication Filing Fee (SNPD)	20.00	7000.00
					Check No. 23,770,101	# 3272 A	11:26

WATER PAYMENT
 GUESTS 350
 CHK NO 770101
 SN PEDRO 7000.00
 TAX 0.00
TOTL 7000.00
 7000.00

12/29/81 jc

TOTAL \$ 7000.00