



**Arizona Department of Water Resources**  
 Water Management Division  
 P.O. Box 36020 Phoenix, Arizona 85067-6020  
 (602) 771-8527 • www.azwater.gov

## Request to Change Well Information

- ❖ Review instructions prior to completing form in black or blue ink.
- ❖ You must include with your Notice:
  - check or money order for any required fee(s)
- ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104

FILE NUMBER

WELL REGISTRATION NUMBER

**55 -**

**\*\* PLEASE PRINT CLEARLY \*\***

### SECTION 1. REGISTRY INFORMATION

<b>Well Owner</b>		<b>Location of Well</b>					
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL		WELL LOCATION ADDRESS (IF ANY)					
MAILING ADDRESS		TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE <span style="margin-left: 40px;">1/4</span>	40 ACRE <span style="margin-left: 40px;">1/4</span>	10 ACRE <span style="margin-left: 40px;">1/4</span>
CITY / STATE / ZIP CODE		LATITUDE °   '   "N Degrees   Minutes   Seconds			LONGITUDE °   '   "W Degrees   Minutes   Seconds		
CONTACT PERSON NAME AND TITLE		METHOD OF LATITUDE/LONGITUDE (CHECK ONE) <input type="checkbox"/> *GPS: Hand-Held <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade *IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (CHECK ONE) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):					
TELEPHONE NUMBER	FAX	COUNTY ASSESSOR'S PARCEL ID NUMBER			COUNTY WHERE WELL IS LOCATED		
		BOOK	MAP	PARCEL			

### Type of Request (CHECK ONE)

- Change of Well Drilling Contractor (Fill out Section 2)    
  Change of Well Ownership (Fill out Section 3)    
  Change of Well Information (location, use, etc.) (Fill out Section 4)

### SECTION 2. REQUEST TO CHANGE WELL DRILLING CONTRACTOR

**FEE \$120 per Well**

- ◆ If drilling or abandoning a well, the Department must receive this request and issue authorization to the new drilling firm prior to the commencement of well drilling or abandonment.

<b>Current Well Drilling Contractor</b>		<b>New Well Drilling Contractor</b>	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL		FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL	
DWR LICENSE NUMBER		DWR LICENSE NUMBER	ROC LICENSE CATEGORY
TELEPHONE NUMBER	FAX	TELEPHONE NUMBER	FAX

### SECTION 3. STATEMENT OF CHANGE OF WELL OWNERSHIP

**FEE \$30 per Well**

◆

<b>Previous Well Owner</b>		<b>New Well Owner</b>	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL		FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL	
MAILING ADDRESS		MAILING ADDRESS	
CITY / STATE / ZIP CODE		CITY / STATE / ZIP CODE	
CONTACT PERSON NAME AND TITLE		CONTACT PERSON NAME AND TITLE	
TELEPHONE NUMBER	FAX	TELEPHONE NUMBER	FAX

### SECTION 4. CHANGE OF WELL INFORMATION (No Fee Required)

**NOTE:** Applies only to wells that have already been drilled. For proposed wells, an amended Notice of Intent to Drill a Well must be filed.

EXPLAIN

### SECTION 5. OPTIONAL BY PROPERTY OWNER AND WELL OWNER ONLY

- By checking this box, I hereby provide ADWR permission to enter the property for the purpose of taking water level measurements at this well. (See instructions.)

### SECTION 6. WELL OWNER SIGNATURE

*I HEREBY CERTIFY that the above statements are true to the best of my knowledge and belief.*

TYPE OR PRINT NAME AND TITLE	SIGNATURE OF WELL OWNER	DATE
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