



ARIZONA DEPARTMENT OF WATER RESOURCES
 Water Planning & Permitting Division
 1802 West Jackson Street, Box #79
 Phoenix, Arizona
 Phone: (602) 771-8737
 Email: recharge@azwater.gov

APPLICATION FOR A RECOVERY WELL PERMIT
 (§45-834.01)

FOR ADWR USE ONLY
Application No: <u>74-_____</u>
Date Received: _____

The initial fee for an application for a Recovery Well Permit is \$1,000. 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 602-771-8737). 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 an application for a Recovery Well Permit are authorized by A.R.S. § 45-871.01 and A.A.C. R12-15-103.

A HYDROLOGIC REPORT, APPLICABLE LETTERS OF CONSENT, AND ANY NECESSARY REQUESTS TO CHANGE WELL INFORMATION MUST BE INCLUDED WITH THIS APPLICATION

PLEASE SUBMIT COMPLETED APPLICATION AND ALL SUPPORTING MATERIALS

APPLICATION FOR: New Permit Modification of Permit No. 74-_____

GENERAL INFORMATION

1. Applicant Name: _____

Mailing Street Address	City	State	Zip
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Contact Person: _____

Telephone: _____

Email Address: _____

Consultant Name (if any): _____

Consultant Telephone: _____

Consultant Email Address: _____

Is the applicant a:

City Private Water Co

Town Irrigation District

Other _____

Describe

2. Name of Active Management Area (AMA) or Irrigation Non-Expansion Area (INA) if applicable, and name of groundwater basin and sub-basin where the proposed recovery well(s) are located:

AMA: _____ Basin/Sub-basin: _____

3. Name of the owner(s) of the land where well sites are located: _____

Landowner Name

Mailing Street Address	City	State	Zip
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[If there is more than one owner, attach a list showing corresponding landowner and well registration number(s)].

4. Legal description of the land where water will be USED: _____
 (10-acre ¼ of the 40-acre ¼ of the 160-acre ¼, Section, Township and Range)

5. The recovered water will be used for: _____

6. The recovery well(s) will be used to recover water stored pursuant to:

Water Storage Permit Number(s): 73- _____

OR

Credits from Long-Term Storage Account Number: 70- _____

7. Is the applicant the storer? YES NO

8. Complete the following for each constructed well. **If data supplied differs from the ADWR Well Registry (including well owner), please complete a "Request to Change Well Information Form" (ADWR form 55-71A) and submit with application. Attach a supplement to list additional wells, if needed.**

Name of Well Owner	Well Registration Number	Legal Location: 10-¼, 40-¼, 160-¼, Section, Township, Range	Design Pump Capacity (GPM)	Well Depth (Borehole) (Feet)	Well Depth (Casing) (Feet)	Well Diameter (Casing) (Inches)	Proposed Annual Volume (Acre-Feet)

9. Complete the following for each proposed well to be constructed. **Include a form 55-90 and well diagram for each well.**

Well Registration Number	Legal Location: 10-¼, 40-¼, 160-¼, Section, Township, Range:	Design Pump Capacity (GPM)	Well Depth (Borehole) (Feet)	Well Depth (Casing) (Feet)	Well Diameter (Casing) (Inches)	Proposed Annual Volume (Acre-Feet)	Estimated Date of New Well Construction	Estimated Time Required To Complete Well

SIGNATURE

I (We), _____, the applicant(s) named in this application, do hereby certify under the penalty of perjury, that the information contained and statements made herein are true and correct.

Telephone

Signature of owner or authorized agent

Date of Signature

Title

Mailing Address

City

State

Zip

NOTICE

A.R.S. § 41-1030(B), (D), (E) and (F) provide as follows:

- B. An agency shall not base a licensing decision in whole or in part on a licensing requirement or condition that is not specifically authorized by statute, rule or state tribal gaming compact. A general grant of authority in statute does not constitute a basis for imposing a licensing requirement or condition unless a rule is made pursuant to that general grant of authority that specifically authorizes the requirement or condition.
- D. This section may be enforced in a private civil action and relief may be awarded against the state. The court may award reasonable attorney fees, damages and all fees associated with the license application to a party that prevails in an action against the state for a violation of this section.
- E. A state employee may not intentionally or knowingly violate this section. A violation of this section is cause for disciplinary action or dismissal pursuant to the agency's adopted personnel policy.
- F. This section does not abrogate the immunity provided by section 12-820.01 or 12-820.02.