

**ORIGINAL**



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AZ CORP COMMISSION  
DOCKET CONTROL

**BEFORE THE ARIZONA CORPORATION COMMISSION**

**COMMISSIONERS**

8  
9 KRISTIN K. MAYES, CHAIRMAN  
10 GARY PIERCE  
11 PAUL NEWMAN  
12 SANDRA D. KENNEDY  
13 BOB STUMP

Arizona Corporation Commission

**DOCKETED**

AUG 27 2010

DOCKETED BY

14  
15 **INDIADA WATER COMPANY'S**  
16 **APPLICATION FOR AN PERMANENT**  
17 **INCREASE IN ITS WATER RATES**

02031A

Docket No. W-02327A-10-0168

**AMENDED RATE APPLICATION**

19 The Indiada Water Company ("Company" or "Indiada"), hereby submit this  
20 amended rate application for an increase in water rates. This application is being  
21 amended at the request of the Arizona Corporation Commission Staff ("Staff"). This  
22 application for proposed rates has been assembled for comparative purposes per Staff's  
23 request, and even though provides stand alone financial analysis for Indiada, it is the  
24 desire of the ownership that the Company be consolidated with East Slope Water  
25 Company and Antelope Water Company into one entity. This new entity would be  
26 structured as a Class C water company.  
27  
28

1 **SUPPORTING DOCUMENTATION**

2 Pursuant to A.A.R. Rule 14-2-103, the Company submits the following  
3 documentation in support of the proposed increase in rates and charges:  
4

- 5 • Direct Testimony of Sonn S. Rowell (see Exhibit 1);
- 6 • Required Schedules, Statements, and Documentation (see Exhibit 2);
- 7 • Water Use Data Sheets (see Exhibit 3 (previously provided));
- 8 • Plant Descriptions (see Exhibit 4 (previously provided));
- 9 • ADEQ Compliance Status Report (see Exhibit 5 (includes documentation  
10 previously provided and additional documentation demonstrating compliance));
- 11 • Monitoring Assistance Program Sampling Fee Invoice (see Exhibit 6 (previously  
12 provided));
- 13 • Water Quality Testing Information (see Exhibit 7); and
- 14 • Water Quality Testing Invoices (see Exhibit 8).

15  
16  
17 As previously discussed with Staff's legal counsel, the public notice for this application  
18 will be provided by the Company pursuant to hearing officer order once the hearing is  
19 set.  
20

21 RESPECTFULLY SUBMITTED this 27<sup>th</sup> day of August, 2010.

22  
23 **MOYES SELLERS & SIMS**

24 

25 Steve Wene  
26 Attorneys for Company  
27  
28

1 Original and 15 copies of the foregoing  
2 filed this 27<sup>th</sup> day of August, 2010, with:

3 Docket Control  
4 Arizona Corporation Commission  
5 1200 West Washington  
6 Phoenix, Arizona 85007

7 Donnelly Herbert  
8  
9

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# **EXHIBIT 1**



1 **Q-3 By whom are you employed and in what capacity?**

2 **A-3** I have been retained by the owners of Indiada Water Company, Inc, (“Indiada” or  
3 “Company”) and the management company, Southwestern Utility Management, Inc.  
4 (“SUM”) to prepare rate and finance applications for submittal to the Arizona  
5 Corporation Commission.  
6

7 **Q-4 What is the purpose of your testimony?**

8 **A-4** The purpose of my testimony is to present my analysis and recommendations  
9 concerning the development of the Company gross revenue requirement, taking into  
10 account adjusted rate base, adjusted operating income, working capital requirements,  
11 current rate of return, required operating income, required rate of return for the historic  
12 twelve month period, and other relevant factors to sponsor certain exhibits in support of  
13 the rate and finance applications.  
14  
15  
16

17 **Q-5 Please summarize the Company proposal.**

18 **A-5** Indiada is seeking an increase in gross revenue of approximately \$29,922, or a rate  
19 increase of approximately 106.82%, for its customers to pay for increased operational  
20 expenses and needed improvements that will be funded with the proposed loan from the  
21 Water Infrastructure Finance Authority (“WIFA”).  
22

23 **Q-6 What is the basis for your recommendation?**

24 **A-6** I analyzed the Companies records to determine the adjusted revenues and  
25 expenses during the test year ending December 31, 2009. Next, I calculated a reasonable  
26 revenue requirement in order to ensure the Companies can earn sufficient revenue to pay  
27 ongoing operating expenses, the debt service on the proposed WIFA loan, and provide  
28

1 adequate and reliable water service to its customers. Based upon my analysis, I have  
2 prepared the schedules in accordance with A.A.C. Rule 14-2-103 that are set forth in  
3 Application Exhibit 2, which I adopt as part of my testimony.  
4

5 **Q-7 Please identify and explain the adjustments made on Schedule C-1 – Adjusted**  
6 **Test Year Income Statement of this application.**

7  
8 **A-7** Adjustment A was made to reduce surcharge revenue by \$869 to eliminate the  
9 revenue generated by the emergency surcharge, which will be discontinued at the  
10 inception of new rates.  
11

12 **Q-8 Does the next adjustment involve intercompany purchased water?**

13 **A-8** Yes. Adjustment B removes \$1,700 of purchased water expense incurred by  
14 Indiada when it purchased water from Antelope Run Water Company (“Antelope”). This  
15 would be considered a non-recurring expense due to the proposed consolidation of the  
16 Companies, and the revenue requirement should not include this amount.  
17

18 **Q-9 Please explain Adjustments C, D, and E.**

19 **A-9** Adjustment C, as reflected on Schedule C-2a removes office related expenses that  
20 appeared on the general ledger prior to the test year, and added expenses incurred during  
21 the test year but were recorded in the general ledger subsequent to it.  
22

23 Schedule C-2b depicts Adjustment D to Outside Services. Part of this adjustment  
24 normalizes accounting expenses for the test year, but the major portion of Adjustment D  
25 removes management fees recorded in the general ledger and replaces them per the  
26 calculation at the bottom of Schedule C-2b. Due to the dire financial situation of this  
27 company, SUM has been charging a reduced rate for its services. However, this is a  
28

1 temporary arrangement, and the correct amount must be included in the proposed revenue  
2 requirement.

3  
4 Adjustment E is calculated on Schedule C-2c, and is similar in purpose to Adjustment C.

5 **Q-10 Please explain your adjustments to the income statement.**

6 **A-10** Adjustment F removes a small amount of expense related to workers  
7 compensation insurance the utility carried when it had employees. Due to the  
8 management contract with SUM now in place, this amount will not recur.

9  
10 **Q-11 How did you determine the amount of proposed rate case expense?**

11 **A-11** My estimate for Adjustment G is detailed in the following table. The current test  
12 year amount includes amounts paid for the 2009 emergency rate case.  
13

14

Test Year Expense	\$1,439
Estimated Rate Case Expense	\$4,000
Subtotal	\$5,439
Recovery period	3
Annual recovery amount	\$1,813
Adjustment amount	\$ 374

15  
16  
17  
18

19 **Q-12 Please explain how you calculated Adjustment H to depreciation expense.**

20 **A-12** Schedule C-2d begins with plant in service at the end of the test year, and applies  
21 depreciation rates normally recommended by Staff, resulting in proposed depreciation  
22 expense of \$7,057, or an increase of \$1,981 over test year actual expense of \$5,076.  
23

24 **Q-13 Please explain Adjustments I and J on Schedule C-1.**

25 **A-13** Adjustment I adjusts payroll taxes (Account 408) by \$958 to remove negative  
26 expense related to payroll tax refunds. Like Adjustment F, since a management contract  
27 with SUM now in place, this amount will not recur.  
28

1 Adjustment J removes a small amount of property tax that is outside the current test year.

2 **Q-14 Please explain the increase to interest expense of \$11,820 as reflected by**  
3 **Adjustment K.**

4 **A-14** The \$11,820 of interest expense represents the prorata share of the proposed  
5 \$3,000,000 consolidated WIFA loan to improve all three commonly owned systems. The  
6 Indiada share of the WIFA loan is estimated as \$239,651, amortized at 5% over a 20-year  
7 period.  
8

9 **Q-15 Please explain how Adjustment L was determined.**

10 **A-15** Adjustment L increased metered water revenue from the adjusted test year amount  
11 of \$28,013, by \$29,922 to \$57,935 for Indiada, per the calculation set forth on Schedule  
12 A-1.  
13

14 **Q-16 Please summarize your rate design for Indiada.**

15 **A-16** Indiada currently has customers on only two meter sizes: 5/8 by 3/4 inch and 1 inch.  
16 All of the customers are residential. The proposed rates for Indiada were designed to  
17 recover the metered water revenue requirement of \$57,935. The monthly minimums  
18 were set using the standard meter size multipliers such that minimum charge for the 1  
19 inch meters is 2.5 times that of the 5/8 by 3/4 inch meters.  
20  
21

22  
23 Commodity rates for the 5/8 by 3/4 inch meters have three tiers. The second tier  
24 commodity rate equals 1.8 times the first tier rate and the third tier rate equals 1.8 times  
25 the second tier rate. The tier breaks are set at 3,000 and 10,000 gallons.  
26

27 Commodity rates for the 1 inch meters have two tiers and equal the first two tier  
28 rates for the 5/8 by 3/4 inch meters. The tier break is set at 6,000 gallons. The usage on

1 the 1 inch meters is quite low and thus a higher tier break would not have any immediate  
2 conservation benefit. The following table shows the effect of the proposed rates on 5/8  
3  
4 by 3/4 inch residential customers with median consumption.

5 Median Gallons	6 Current Bill (Including Surcharge)	7 Bill Under Proposed Rates	8 Percent Increase
9 5,260	10 \$37.74	11 \$61.81	12 63.79%

13 **Q-17 Is there anything else you would like to add?**

14 **A-17** Yes. A complete application including proposed rates has been assembled for  
15 Indiada for comparative purposes per Staff's request. Although this application provided  
16 stand alone financial analysis for Indiada, it is the desire of the ownership that Indiada be  
17 consolidated with Antelope and East Slope Water Company, Inc. into one entity. This  
18 new entity would be structured as a C-Corp, unlike Indiada as a stand alone entity, and  
19 includes a gross up for income tax recovery.

20 **Q-18 Does this conclude your testimony?**

21 **A-18** Yes.  
22  
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# **EXHIBIT 2**

Indiada Water Company, Inc.  
 Test Year Ended December 31, 2009

Schedule A-1  
 Title: Computation of Increase in Gross  
 Revenue Requirements

Explanation:  
 Schedule showing computation of increase in  
 gross revenue requirements and spread of revenue  
 increase by customer classification.

Required for: All Utilities	X
Class A	
Class B	
Class C	
Class D	
Special Reqmt	

	Original Cost		RCND	
1. Adjusted Rate Base	\$ 45,684	(a)		(a)
2. Adjusted Operating Income	\$ (6,197)	(b)		(b)
3. Current Rate of Return		-13.57%		
4. Required Operating Income	\$ 5,482			
5. Required Rate of Return		12.00%		
6. Operating Income Deficiency (4 - 2)	\$ 11,679			
7. Gross Revenue Conversion Factor	1.0000	(c)		(c)
8. Increase in Gross Revenue Requirements (6 x 7)	\$ 11,679			

9. Proposed Revenue	\$ 58,062
10. Required Operating Margin	40.86%
11. Required Operating Income (9 x 10)	\$ 23,725
12. Operating Income Deficiency (11 - 2)	\$ 29,922
13. Gross Revenue Conversion Factor	1.000
14. Increase in Gross Revenue Requirements (12 x 13)	\$ 29,922

Customer Classification	Adjusted Revenue at Present Rates	Revenue at Proposed Rates	Dollar Increase	Percent Increase	
Residential	\$ 28,013	\$ 57,935	\$ 29,922	106.82%	(d)
Commercial					
Industrial					
Other	127	127	-	0.00%	
<b>Total</b>	<b>\$ 28,140</b>	<b>\$ 58,062</b>	<b>\$ 29,922</b>	<b>106.82%</b>	

Note: For combination utilities, the above information should be presented in total and by department.

Supporting Schedules:

- (a) B-1 (c) C-3
- (b) C-1 (d) H-1

**Indiada Water Company, Inc.**  
 Test Year Ended December 31, 2009

**Schedule A-2**  
**Title: Summary Results of Operations**

Required for: All Utilities	<input checked="" type="checkbox"/>
Class A	<input type="checkbox"/>
Class B	<input type="checkbox"/>
Class C	<input type="checkbox"/>
Class D	<input type="checkbox"/>
Specf Reqmt	<input type="checkbox"/>

Explanation:  
 Schedule showing comparative operating results for the test year and the 2 fiscal years ended prior to the end of the test year, compared with the projected year.

Description	<u>Prior Years</u>		<u>Test Year</u>		<u>Projected Year</u>	
	Year End	Year End	Actual	Adjusted	Present	Proposed
	31-Dec-07	31-Dec-08	Rates	Rates	Rates	Rates
	(a)	(a)	(a)	(b)	(c)	(c)
1. Gross Revenues	\$ 27,440	\$ 25,085	\$ 29,009	\$ 28,140	\$ 28,140	\$ 58,062
2. Revenue Deductions & Operating Expenses	(29,597)	(31,084)	(28,702)	(34,337)	(34,337)	(34,337)
3. Operating Income	\$ (2,157)	\$ (5,999)	\$ 307	\$ (6,197)	\$ (6,197)	\$ 23,725
4. Other Income and Deductions	3,750	4,515	-	-	-	-
5. Interest Expense	(1,045)	(700)	-	(11,820)	(11,820)	(11,820)
6. Net Income	\$ 548	\$ (2,184)	\$ 307	\$ (18,017)	\$ (18,017)	\$ 11,905
7. Earned Per Average Common Share*	\$ 1.33	\$ (5.29)	\$ 0.74	\$ (43.62)		
8. Dividends Per Common Share*	-	-	-	-		
9. Payout Ratio*	0.00%	0.00%	0.00%	0.00%		
10. Return on Average Invested Capital	5.07%	-10.05%	0.79%	-46.58%	-46.58%	30.78%
11. Return on Year End Capital	5.07%	-6.69%	0.69%	-40.28%	-40.28%	26.62%
12. Return on Average Common Equity	5.07%	-10.05%	0.79%	-46.58%	-46.58%	30.78%
13. Return on Year End Common Equity	5.07%	-6.69%	0.69%	-40.28%	-40.28%	26.62%
14. Times Bond Interest Earned - Before Inc Tax	-152.44%	212.00%			Not Meaningful	
15. Times Total Interest and Preferred Dividends Earned - After Income Taxes	47.56%	412.00%			Not Meaningful	

Supporting Schedules:

- (a) E-2
- (b) C-1
- (c) F-1

\*Optional for projected year

**Indiada Water Company, Inc.**  
 Test Year Ended December 31, 2009

**Schedule A-4**  
**Title: Construction Expenditures and**  
**Gross Utility Plant in Service**

Explanation:  
 Schedule showing construction expenditures, plant placed in service and gross utility plant in service for the test year and the 2 fiscal years ended prior to the end of the test year, compared with the projected year.

Required for: All Utilities	X
Class A	
Class B	
Class C	
Class D	
Specl Reqmt	

Year	Construction Expenditures (a)	Net Plant Placed In Service (b)	Gross Utility Plant In Service
1. Prior Year 1 - 2007	\$ 2,323	\$ 2,323	\$ 67,086
2. Prior Year 2 - 2008	25,521	25,521	92,607
3. Test Year - 2009	3,364	3,364	95,971
4. Projected Year 1	239,651	239,651	335,622
5. Projected *			
6. Projected *			

\* Required only for Class A and B Utilities

NOTE: For combination utilities, above information should be presented in total and by department.

Supporting Schedules:

- (a) F-3
- (b) E-5

**Indiada Water Company, Inc.**  
 Test Year Ended December 31, 2009

**Schedule B-1**  
**Title: Summary of Original Cost**  
**and RCND**

Explanation:  
 Schedule showing elements of adjusted original cost  
 and RCND rate bases.

Required for: All Utilities	X
Class A	
Class B	
Class C	
Class D	
Spec'l Reqmt	

	Original Cost Rate Base*	RCND Rate Base*
1. Gross Utility Plant in Service	\$ 95,971	
2. Less: Accumulated Depreciation	(53,371)	
3. Net Utility Plant in Service	\$ 42,600 (a)	(b)
<b>Less:</b>		
4. Advances in Aid of Construction	- (c)	(c)
5. Contributions in Aid of Construction	- (c)	(c)
<b>Add:</b>		
6. Allowance for Working Capital	3,083 (d)	(d)
<b>7. Total Rate Base</b>	<b>\$ 45,684 (e)</b>	(e)

\* Including pro forma adjustments

NOTE: For combination utilities, above information should be presented in total and by department.

Supporting Schedules:  
 (a) B-2 (d) B-5  
 (b) B-3  
 (c) E-1

Recap Schedules:  
 (e) A-1

**Indiada Water Company, Inc.**  
 Test Year Ended December 31, 2009

**Schedule B-2**  
**Title: Original Cost Rate Base**  
**Proforma Adjustments**

Explanation:  
 Schedule showing pro forma adjustments to gross plant in service and accumulated depreciation for the original cost rate base.

Required for: All Utilities   
 Class A   
 Class B   
 Class C   
 Class D   
 Specl Reqmt

	<b>Actual at End Of Test Year (a)</b>	<b>Pro forma Adjustment</b>	<b>Adjusted at End Of Test Year (b)</b>
1. Gross Utility Plant in Service	\$ 95,971		\$ 95,971
2. Less: Accumulated Depreciation	(53,371)		(53,371)
3. Net Utility Plant in Service	<u>\$ 42,600</u>	<u>\$ -</u>	<u>\$ 42,600</u>

*All pro forma adjustments should be adequately explained on this schedule or on attachments hereto.*

NOTE: For combination utilities, above information should be presented in total and by department.

Supporting Schedules:  
 (a) E-1

Recap Schedules:  
 (b) B-1

**Indiada Water Company, Inc.**  
 Test Year Ended December 31, 2009

**Schedule B-5**  
**Title: Computation of Working Capital**

Explanation:  
 Schedule showing computation of working capital allowance.

Required for:	All Utilities	<input checked="" type="checkbox"/>
	Class A	<input type="checkbox"/>
	Class B	<input type="checkbox"/>
	Class C	<input type="checkbox"/>
	Class D	<input type="checkbox"/>
	Specif Reqmt	<input type="checkbox"/>

	<u>Amount</u>	
1. Cash working capital		
1/24th Purchased Power	\$ 76	
1/24th Purchased Water	-	
1/8th Operation & Maintenance Expense	3,008	
2. Materials and Supplies Inventories	-	(a)
3. Prepayments	-	(a)
	<u>          </u>	
4. Total Working Capital Allowance	<u>\$ 3,083</u>	(b)

NOTES:

1. Adequate detail should be provided to determine the bases for the above computations.
2. Adjusted test year operating expenses should be used in computing cash working capital requirements.
3. Combination utilities should compute working capital allowances for each department.

Supporting Schedules:  
 (a) E-1

Recap Schedules:  
 (b) B-1

Required for: All Utilities	<input checked="" type="checkbox"/>
Class A	<input type="checkbox"/>
Class B	<input type="checkbox"/>
Class C	<input type="checkbox"/>
Class D	<input type="checkbox"/>
Specf Reqmt	<input type="checkbox"/>

Explanation:  
 Schedule showing statement of income for the test year,  
 including pro forma adjustments.

Description	Actual for Test Year Ended (a)		Proforma Adjustments		Test Year Results After Pro Forma Adjustments		Proposed Rate	Adjusted Test Year With
	31-Dec-09	Ref	(b)		Ref	Increase	Rate Increase	
<b>Operating Revenues:</b>								
461 Metered Water Revenue	\$ 28,013			\$ 28,013	L	\$ 29,922	\$ 57,935	
461.1 Surcharge Revenue	869	A	(869)	-			-	
474 Other Water Revenue	127			127			127	
<b>Total Operating Revenue</b>	<b>\$ 29,009</b>		<b>\$ (869)</b>	<b>\$ 28,140</b>		<b>\$ 29,922</b>	<b>\$ 58,062</b>	
<b>Operating Expenses:</b>								
601 Salaries & Wages	\$ -			\$ -			\$ -	
610 Purchased Water	1,700	B	(1,700)	-			-	
615 Purchased Power	1,818			1,818			1,818	
618 Chemicals	166			166			166	
620 Repairs & Maintenance	910			910			910	
621 Office Supplies and Expense	1,336	C	48	1,384			1,384	
630 Outside Services	9,937	D	4,164	14,101			14,101	
635 Water Testing	2,129			2,129			2,129	
641 Rental Expense	-			-			-	
650 Transportation Expense	3,688	E	(131)	3,557			3,557	
657 Insurance - General Liability	49	F	(49)	-			-	
659 Insurance - Health and Life	-			-			-	
666 Rate Case Expense	1,439	G	374	1,813			1,813	
675 Miscellaneous Expense	-			-			-	
403 Depreciation & Amortization	5,076	H	1,981	7,057			7,057	
408 Taxes Other Than Income	(958)	I	958	-			-	
408.11 Property Taxes	1,412	J	(10)	1,402			1,402	
409 Income Taxes	-			-			-	
<b>Total Operating Expenses</b>	<b>\$ 28,702</b>		<b>\$ 5,635</b>	<b>\$ 34,337</b>		<b>\$ -</b>	<b>\$ 34,337</b>	
<b>OPERATING INCOME/(LOSS)</b>	<b>\$ 307</b>		<b>\$ (6,504)</b>	<b>\$ (6,197)</b>	(c)	<b>\$ 29,922</b>	<b>\$ 23,725</b>	
<b>Other Income/(Expense):</b>								
419 Interest Income	\$ -			\$ -			\$ -	
421 Non-Utility Income	-			-			-	
426 Miscellaneous Non-Utility Expenses	-			-			-	
427 Interest Expense	-	K	(11,820)	(11,820)			(11,820)	
<b>Total Other Income/(Expense)</b>	<b>\$ -</b>		<b>\$ (11,820)</b>	<b>\$ (11,820)</b>		<b>\$ -</b>	<b>\$ (11,820)</b>	
<b>NET INCOME/(LOSS)</b>	<b>\$ 307</b>		<b>\$ (18,324)</b>	<b>\$ (18,017)</b>		<b>\$ 29,922</b>	<b>\$ 11,906</b>	

Note: For combination utilities, above information should be presented in total and by department.  
 Actual Test Year amounts are transferred from Schedule C-1a.

Supporting Schedules:  
 (a) E-2  
 (b) C-2

Recap Schedules:  
 (c) A-1



Indiada Water Company, Inc.  
Test Year Ended December 31, 2009

Schedule C-2a  
Title: Income Statement Proforma  
Adjustments

**DETAIL OF PROPOSED OFFICE SUPPLIES AND EXPENSE ADJUSTMENT**

Description	Amount
November 2008 billing forms	\$ (2)
December 2008 billing forms	(2)
November 2009 billing forms	2
December 2009 billing forms	2
November 2008 postage	(15)
December 2008 postage	(15)
November 2009 postage	59
December 2009 postage	19
<b>Total Adjustment C</b>	<b>\$ 48</b>

Indiada Water Company, Inc.  
Test Year Ended December 31, 2009

Schedule C-2b  
Title: Income Statement Proforma  
Adjustments

**DETAIL OF PROPOSED OUTSIDE SERVICES EXPENSE ADJUSTMENT**

<b>Description</b>	<b>Amount</b>
December 2008 accounting	(130)
November 2009 accounting	130
December 2009 accounting	130
Remove test year management fees expense per general ledger	(5,602)
Proforma management fees expense	\$ 9,636
<b>Total Adjustment D</b>	<b>\$ 4,164</b>

Indiada Water Company, Inc.  
Test Year Ended December 31, 2009

Schedule C-2c  
Title: Income Statement Proforma  
Adjustments

**DETAIL OF PROPOSED TRANSPORTATION EXPENSE ADJUSTMENT**

<b>Description</b>	<b>Amount</b>
November 2008 mileage	\$ (82)
December 2008 mileage	(230)
November 2009 mileage	178
December 2009 mileage	203
Non-recurring vehicle lease expenses	(200)
<b>Total Adjustment E</b>	<b>\$ (131)</b>

**DETAIL OF PROPOSED DEPRECIATION EXPENSE CALCULATION**

Account Number	Description	Plant @ End of Test Year 31-Dec-09	Proposed Depreciation Rate	Ref	Proposed Depreciation Expense	
302	Franchises	\$ -	0.00%		\$ -	
303	Land & Land Rights	750	0.00%		-	
304	Structures & Improvements	-	3.33%		-	
307	Wells & Springs	7,786	3.33%	1	-	
311	Pumping Equipment	16,453	12.50%		2,057	
320	Water Treatment Equipment				-	
320.1	Water Treatment Plants	-	3.33%		-	
320.2	Solution Chemical Feeders	1,076	20.00%		215	
330	Distribution Reservoirs & Standpipes	1,503	2.22%		33	
330.1	Storage Tanks	10,865	2.22%		241	
330.2	Pressure Tanks	5,054	5.00%		253	
331	Transmission & Distribution Mains	26,736	2.00%	2	159	
333	Services	474	3.33%	3	-	
334	Meters & Meter Installations	3,440	8.33%	4	237	
335	Hydrants	-	2.00%		-	
339	Other Plant and Misc Equipment	-	6.67%		-	
340	Office Furniture & Equipment	3,789	6.67%		253	
340.1	Computers and Software	-	20.00%		-	
341	Transportation Equipment	18,045	20.00%		3,609	
343	Tools, Shop, and Garage Equipment	-	5.00%		-	
345	Power Operated Equipment	-	5.00%		-	
348	Other Tangible Plant	-	0.00%		-	
<b>Proposed Totals</b>		<b>\$ 95,971</b>			<b>\$ 7,057</b>	
					Test Year Depreciation Expense	5,076
					<b>Total Adjustment H</b>	<b>\$ 1,981</b>

- 1 Amount in Account 307 - Wells & Springs, is fully depreciated.
- 2 \$18,780 of total in Account 331 - Transmission & Distribution Mains, is fully depreciated.
- 3 Amount in Account 333 - Services, is fully depreciated.
- 4 \$593 of total in Account 334 - Meters & Meter Installations, is fully depreciated.

Indiada Water Company, Inc.  
 Test Year Ended December 31, 2009

**Schedule C-3**  
**Title: Computation of Gross Revenue**  
**Conversion Factor**

Explanation:  
 Schedule showing incremental taxes on gross revenues and  
 the development of a gross revenue conversion factor.

Required for: All Utilities   
 Class A   
 Class B   
 Class C   
 Class D   
 Specl Reqmt

Description	Calculation
Revenue	1.0000
Combined Federal And State Tax Rate	-
Subtotal	<u>1.0000</u>
<b>Gross Revenue Conversion Factor = 1/Operating Income %</b>	<b><u><u>1.0000</u></u></b>

*CALCULATION OF COMBINED FEDERAL AND STATE TAX RATE:*

Operating Income Before Taxes (Arizona Taxable Income)	100.0000%
Arizona State Income Tax Rate	<u>0.0000%</u>
Federal Taxable Income	100.0000%
Federal Income Tax Rate	<u>0.0000%</u>
Effective Federal Income Tax Rate	0.0000%
Combined Federal And State Income Tax Rates	<u><u>0.0000%</u></u>

Indiada Water Company, Inc.  
 Test Year Ended December 31, 2009

Schedule D-1  
 Title: Summary Cost of Capital

Explanation:  
 Schedule showing elements of capital structure  
 and the related cost.

Required for: All Utilities	<input checked="" type="checkbox"/>
Class A	<input type="checkbox"/>
Class B	<input type="checkbox"/>
Class C	<input type="checkbox"/>
Class D	<input type="checkbox"/>
Specf Reqmt	<input type="checkbox"/>

Invested Capital	End of Test Year				End of Projected Year			
	Amount	%	Cost Rate (e)	Composite Cost %	Amount	%	Cost Rate (e)	Composite Cost %
Long-Term Debt (a)	\$ -				\$ 239,651	84.27%	5.00%	4.21%
Short-Term Debt (a)	-				-			
Common Equity (c)	44,726	100.00%	12.00%	12.00%	44,726	15.73%	12.00%	1.89%
<b>Totals</b>	<b>\$ 44,726</b>	<b>100.00%</b>		<b>12.00%</b>	<b>\$ 284,377</b>	<b>100.00%</b>		<b>6.10%</b>

Supporting Schedules:

- (a) D-2
- (b) D-3
- (c) D-4
- (d) E-1

Recap Schedules:

- (e) A-3

**Indiada Water Company, Inc.**  
 Test Year Ended December 31, 2009

**Schedule E-1**  
**Title: Comparative Balance Sheet**

Explanation:  
 Schedule showing comparative balance sheets at the end of the test year and the 2 fiscal years ended prior to the test year.

Required for:	All Utilities	<input checked="" type="checkbox"/>
	Class A	<input type="checkbox"/>
	Class B	<input type="checkbox"/>
	Class C	<input type="checkbox"/>
	Class D	<input type="checkbox"/>
	Spec'l Reqmt	<input type="checkbox"/>

	Test Year At 31-Dec-09	Prior Year 31-Dec-08	Prior Year 31-Dec-07
<b>ASSETS</b>			
Property, Plant & Equipment: (a)			
101 Utility Plant In Service	\$ 95,971	\$ 92,607	\$ 67,086
103 Property Held for Future Use	-	-	-
105 Construction Work in Process	-	-	-
108 Accumulated Depreciation	(53,371)	(50,075)	(47,502)
Total Property Plant & Equipment	\$ 42,600	\$ 42,532	\$ 19,584
Current Assts:			
131 Cash	\$ 701	\$ 4,718	\$ 3,017
135 Temporary Cash Investments			
141 Customer Accounts Receivable	106		-
146 Notes/Receivables from Associated Companies	2,000	2,000	1,000
151 Plant Material and Supplies			
162 Prepayments			
174 Miscellaneous Current and Accrued Assets	3,010	3,000	3,000
Total Current Assets	\$ 5,817	\$ 9,718	\$ 7,017
<b>TOTAL ASSETS</b>	<b>\$ 48,417</b>	<b>\$ 52,250</b>	<b>\$ 26,601</b>
<b>LIABILITIES and CAPITAL</b>			
Capitalization: (b)			
201.1 Common Stock Issued	\$ 41,300	\$ 41,300	\$ 41,300
201.2 Treasury Stock	(11,300)	(11,300)	(11,300)
211 Paid in Capital in Excess of Par Value	(12,320)	(22,643)	(22,643)
215 Retained Earnings	27,046	25,277	3,462
218 Proprietary Capital			
Total Capital	\$ 44,726	\$ 32,634	\$ 10,819
Current Liabilities:			
231 Accounts Payable	\$ 3,533	\$ 7,898	\$ 292
232 Notes Payable (Current Portion)			
234 Notes/Accounts Payable to Associated Companies			
235 Customer Deposits	680	630	500
236 Accrued Taxes	(522)	565	667
241 Miscellaneous Current and Accrued Liabilities			
Total Current Liabilities	\$ 3,691	\$ 9,093	\$ 1,459
224 Long-Term Debt (Over 12 Months)	\$ -	\$ 10,523	\$ 14,323
Deferred Credits:			
252 Advances In Aid Of Construction	\$ -	\$ -	\$ -
271 Contributions In Aid Of Construction	-	-	-
272 Less: Amortization of Contributions			
281 Accumulated Deferred Income Tax			
Total Deferred Credits	\$ -	\$ -	\$ -
Total Liabilities	\$ 3,691	\$ 19,616	\$ 15,782
<b>TOTAL LIABILITIES and CAPITAL</b>	<b>\$ 48,417</b>	<b>\$ 52,250</b>	<b>\$ 26,601</b>

Supporting Schedules:  
 (a) E-5

Recap Schedules:  
 (b) A-3

**Indiada Water Company, Inc.**  
 Test Year Ended December 31, 2009

**Schedule E-2**  
**Title: Comparative Income**  
**Statements**

Required for: All Utilities	X
Class A	
Class B	
Class C	
Class D	
Specil Reqmt	

Explanation:  
 Schedule showing comparative income statements for the test year and the 2 fiscal years ended prior to the test year.

	<b>Test Year</b>	<b>Prior Year</b>	<b>Prior Year</b>
	<b>Ended</b>	<b>Ended</b>	<b>Ended</b>
	<b>31-Dec-09</b>	<b>31-Dec-08</b>	<b>31-Dec-07</b>
<b>Revenues: (a)</b>			
461 Metered Water Revenue	\$ 28,013	\$ 24,885	\$ 27,380
461.1 Surcharge Revenue	869	-	-
474 Other Water Revenue	127	200	60
Total Revenues	<u>\$ 29,009</u>	<u>\$ 25,085</u>	<u>\$ 27,440</u>
<b>Operating Expenses (a)</b>			
601 Salaries & Wages	\$ -	\$ 6,750	\$ 9,000
610 Purchased Water	1,700	2,150	4,009
615 Purchased Power	1,818	1,631	986
618 Chemicals	166	-	-
620 Repairs and Maintenance	910	3,983	3,714
621 Office Supplies and Expense	1,336	4,244	746
630 Outside Services	9,937	2,672	1,756
635 Water Testing	2,129	1,163	600
641 Rents	-	900	1,200
650 Transportation Expense	3,688	982	-
657 Insurance - General liability	49	-	-
659 Insurance - Health and Life	-	-	-
666 Regulatory Commission Expense - Rate Case	1,439	-	-
675 Miscellaneous Expense	-	-	361
403 Depreciation Expense	5,076	4,892	3,556
408 Taxes Other Than Income	(958)	1,026	1,905
408.11 Property Taxes	1,412	691	1,764
409 Income Tax	-	-	-
Total Operating Expenses	<u>\$ 28,702</u>	<u>\$ 31,084</u>	<u>\$ 29,597</u>
<b>OPERATING INCOME/(LOSS)</b>	<u>\$ 307</u>	<u>\$ (5,999)</u>	<u>\$ (2,157)</u>
<b>Other Income/(Expense)</b>			
419 Interest and Dividend Income	\$ -	\$ -	\$ -
421 Non-Utility Income	-	4,515	4,000
426 Miscellaneous Non-Utility Expense	-	-	(250)
427 Interest Expense	-	(700)	(1,045)
Total Other Income/(Expense)	<u>\$ -</u>	<u>\$ 3,815</u>	<u>\$ 2,705</u>
<b>NET INCOME/(LOSS)</b>	<u>\$ 307</u>	<u>\$ (2,184)</u>	<u>\$ 548</u>

Supporting Schedules:  
 (a) E-6

Recap Schedules:  
 A-2

**Indiada Water Company, Inc.**  
 Test Year Ended December 31, 2009

**Schedule E-5**  
**Title: Detail of Utility Plant**

Explanation:  
 Schedule showing utility plant balance, by detailed account number, at the end of the test year and the end of the prior fiscal year.

Required for: All Utilities	<input checked="" type="checkbox"/>
Class A	<input type="checkbox"/>
Class B	<input type="checkbox"/>
Class C	<input type="checkbox"/>
Class D	<input type="checkbox"/>
Specl Reqmt	<input type="checkbox"/>

<b>Account Number</b>	<b>Description</b>	<b>End of Prior Year at 31-Dec-08</b>	<b>Net Additions</b>	<b>End of Test Year at 31-Dec-09</b>
302	Franchises	\$ -		\$ -
303	Land & Land Rights	750		750
304	Structures & Improvements	-		-
307	Wells & Springs	7,786		7,786
311	Pumping Equipment	14,289	2,164	16,453
320	Water Treatment Equipment	-		-
320.1	Water Treatment Plants	-		-
320.2	Solution Chemical Feeders	1,076		1,076
330	Distribution Reservoirs & Standpipes	1,503		1,503
330.1	Storage Tanks	10,865		10,865
330.2	Pressure Tanks	5,054		5,054
331	Transmission & Distribution Mains	25,536	1,200	26,736
333	Services	474		474
334	Meters & Meter Installations	3,440		3,440
335	Hydrants	-		-
339	Other Plant and Misc Equipment	-		-
340	Office Furniture & Equipment	3,789		3,789
340.1	Computers and Software	-		-
341	Transportation Equipment	18,045		18,045
343	Tools, Shop, and Garage Equipment	-		-
345	Power Operated Equipment	-		-
348	Other Tangible Plant	-		-
	<b>Total Plant In Service</b>	<b>\$ 92,607</b>	<b>\$ 3,364</b>	<b>\$ 95,971</b>
108	Accumulated Depreciation	(50,075)	(3,295)	(53,371)
	<b>Net Plant In Service</b>	<b>\$ 42,532</b>	<b>\$ 69</b>	<b>\$ 42,600</b>
103	Property Held for Future Use	\$ -		\$ -
105	Construction Work in Process	-		-
	<b>Total Net Plant</b>	<b>\$ 42,532</b>	<b>\$ 69</b>	<b>\$ 42,600</b>

Supporting Schedules:

Recap Schedules:  
 E-1 A-4

**Indiada Water Company, Inc.**  
 Test Year Ended December 31, 2009

**Schedule E-7**  
**Title: Operating Statistics**

Explanation:  
 Schedule showing key operating statistics in comparative format,  
 for the test year and the 2 fiscal years ended prior to the test year.

Required for:	All Utilities	<input checked="" type="checkbox"/>
	Class A	<input type="checkbox"/>
	Class B	<input type="checkbox"/>
	Class C	<input type="checkbox"/>
	Class D	<input type="checkbox"/>
	Specil Reqmt	<input type="checkbox"/>

<b>Water Statistics:</b>	<b>Test Year Ended 31-Dec-09</b>	<b>Prior Year Ended 31-Dec-08</b>	<b>Prior Year Ended 31-Dec-07</b>
Gallons Sold - By Class of Service:			
Residential	5,850,000	5,267,000	2,586,600
Commercial	-	-	-
Average Number of Customers - By Class of Service:			
Residential	55	56	54
Commercial	-	-	-
Average Annual Gallons Per Residential Customer	106,364	94,054	47,900
Average Annual Revenue Per Residential Customer	\$ 261.46	\$ 245.09	\$ 183.71
Pumping Cost Per 1,000 Gallons	\$ 0.3108	\$ 0.3097	\$ 0.3812

**Indiada Water Company, Inc.**  
 Test Year Ended December 31, 2009

**Schedule E-8**  
**Title: Taxes Charged to Operations**

Explanation:  
 Schedule showing all significant taxes charged to operations for  
 the test year and the 2 fiscal years ended prior to the test year.

Required for: All Utilities	<input checked="" type="checkbox"/>
Class A	<input type="checkbox"/>
Class B	<input type="checkbox"/>
Class C	<input type="checkbox"/>
Class D	<input type="checkbox"/>
Specil Reqmt	<input type="checkbox"/>

Description	Test Year Ended 31-Dec-09	Prior Year Ended 31-Dec-08	Prior Year Ended 31-Dec-07
Federal Taxes:			
Income	\$ -	\$ -	\$ -
Payroll	(958)	570	761
<b>Total Federal Taxes</b>	<b>\$ (958)</b>	<b>\$ 570</b>	<b>\$ 761</b>
State Taxes:			
Income	\$ -	\$ -	\$ -
Payroll	-	456	1,145
<b>Total State Taxes</b>	<b>\$ -</b>	<b>\$ 456</b>	<b>\$ 1,145</b>
Local Taxes:			
Property	\$ 1,412	\$ 691	\$ 1,764
<b>Total Taxes</b>	<b>\$ 454</b>	<b>\$ 1,717</b>	<b>\$ 3,669</b>

NOTE: For combination utilities, the above should be presented in total and by department.

Supporting Schedules:

Recap Schedules:

Indiada Water Company, Inc.  
Test Year Ended December 31, 2009

Schedule E-9  
Title: Notes to Financial  
Statements

Explanation:  
Disclosure of important facts pertaining to the understanding  
of the financial statements.

Required for:	All Utilities	<input checked="" type="checkbox"/>
	Class A	<input type="checkbox"/>
	Class B	<input type="checkbox"/>
	Class C	<input type="checkbox"/>
	Class D	<input type="checkbox"/>
	Spec'l Reqmt	<input type="checkbox"/>

Disclosures should include, but not be limited to the following:

1 Accounting Method.

**The books of the combined entity are kept as accrual based, and also follow NARUC rules, including the USoA.**

2 Depreciation lives and methods employed by major classification of utility property.

**For years up to and including the test year 2009, the depreciation rate as authorized in Decision 54500 was 5% for all plant asset categories. Proposed depreciation rates are depicted on Schedule C-2a, and were taken from ACC Engineering Staff Memo regarding their recommended rates for depreciation dated April 21, 2000, and revised March 1, 2001.**

3 Income tax treatment - normalization or flow through.

**Income taxes are not a factor in the unconsolidated company since the entity is an S-Corp.**

4 Interest rate used to charge interest during construction, if applicable.

**Not Applicable.**

Supporting Schedules:

Recap Schedules:

**Indiada Water Company, Inc.**  
 Test Year Ended December 31, 2009

**Schedule F-1**  
**Title: Projected Income Statements -**  
**Present and Proposed Rates**

Explanation:  
 Schedule showing an income statement for the projected year,  
 compared with actual test year results, at present and proposed  
 rates.

Required for: All Utilities	<input checked="" type="checkbox"/>
Class A	<input type="checkbox"/>
Class B	<input type="checkbox"/>
Class C	<input type="checkbox"/>
Class D	<input type="checkbox"/>
Specil Reqmt	<input type="checkbox"/>

	Actual Test Year Ended (a) 31-Dec-09	Projected Year	
		At Present Rates Year Ended (b) 31-Dec-10	At Proposed Rates Year Ended (b) 31-Dec-10
<b>Operating Revenues:</b>			
461 Metered Water Revenue	\$ 28,013	\$ 28,013	\$ 57,935
461.1 Surcharge Revenue	869	-	-
474 Other Water Revenue	127	127	127
<b>Total Operating Revenue</b>	<b>\$ 29,009</b>	<b>\$ 28,140</b>	<b>\$ 58,062</b>
<b>Operating Expenses:</b>			
601 Salaries & Wages	\$ -	\$ -	\$ -
610 Purchased Water	1,700	-	-
615 Purchased Power	1,818	1,818	1,818
618 Chemicals	166	166	166
620 Repairs & Maintenance	910	910	910
621 Office Supplies and Expense	1,336	1,384	1,384
630 Outside Services	9,937	14,101	14,101
635 Water Testing	2,129	2,129	2,129
641 Rental Expense	-	-	-
650 Transportation Expense	3,688	3,557	3,557
657 Insurance - General Liability	49	-	-
659 Insurance - Health and Life	-	-	-
666 Rate Case Expense	1,439	1,813	1,813
675 Miscellaneous Expense	-	-	-
403 Depreciation & Amortization	5,076	7,057	7,057
408 Property Taxes	(958)	-	-
408.1 Taxes Other Than Income	1,412	1,402	1,402
409 Income Taxes	-	-	-
<b>Total Operating Expenses</b>	<b>\$ 28,702</b>	<b>\$ 34,337</b>	<b>\$ 34,337</b>
<b>OPERATING INCOME/(LOSS)</b>	<b>\$ 307</b>	<b>\$ (6,197)</b>	<b>\$ 23,725</b>
<b>Other Income/(Expense):</b>			
419 Interest Income	\$ -	\$ -	\$ -
421 Non-Utility Income	-	-	-
426 Miscellaneous Non-Utility Expenses	-	-	-
427 Interest Expense	-	(11,820)	(11,820)
<b>Total Other Income/(Expense)</b>	<b>\$ -</b>	<b>\$ (11,820)</b>	<b>\$ (11,820)</b>
<b>NET INCOME/(LOSS)</b>	<b>\$ 307</b>	<b>\$ (18,017)</b>	<b>\$ 11,905</b>
Earnings per share of average Common Stock Outstanding	\$ 0.74	\$ (43.62)	\$ 28.83
% Return on Common Equity	0.002%	-0.098%	0.064%

Supporting Schedules:  
 (a) E-2

Recap Schedules:  
 (b) A-2

**Indiada Water Company, Inc.**  
 Test Year Ended December 31, 2009

**Schedule F-3**  
**Title: Projected Construction Requirements**

Explanation:  
 Schedule showing projected annual construction requirements,  
 by property classification, for 1 to 3 years subsequent to the  
 test year compared with the test year.

Required for: All Utilities  
 Class A  
 Class B  
 Class C  
 Class D  
 Specl Reqmt

X

<b>Property Classification</b>	<b>Actual Test Year Ended 12/31/2009</b>	<b>End of Projected Year 1</b>
Production Plant	\$ 2,164	\$ -
Transmission Plant	1,200	239,651
Other Plant	-	-
<b>Total Plant</b>	<b>\$ 3,364</b>	<b>\$ 239,651</b>

NOTE: For combination utilities, the above should be presented by department.

Supporting Schedules:

Recap Schedules:  
 (a) F-2 & A-4

Indiada Water Company, Inc.  
Test Year Ended December 31, 2009

Schedule F-4  
Title: Assumptions Used in  
Developing Projection

Explanation:  
Documentation of important assumptions used in preparing  
forecasts and projections

Required for: All Utilities  
Class A  
Class B  
Class C  
Class D  
Spec Reqmt

X

Important assumptions used in preparing projections should be explained.

Areas covered should include:

1 Customer growth:

**The company has experienced no growth in the past few years.**

2 Growth in consumption and customer demand:

**The company does not anticipate an increase in customer consumption and demand due to the proposed tiered rate structure.**

3 Changes in expenses:

**The company believes the test year 2009, with the limited proforma adjustments included in this application, accurately depict expense levels for the unconsolidated entity going forward.**

4 Construction requirements including production reserves and changes in plant capacity:

**The Company is seeking a loan from WIFA for the three commonly owned entities totaling \$3 million to replace lines, add storage, and upgrade pumps and electrical at well and booster sites.**

5 Capital structure changes:

**If the proposed consolidation of Indiada Water with the two related entities is approved, the new utility's structure would be a C-Corp.**

6 Financing costs, interest rates

**The company proposes to borrow funds from WIFA, and it will be required to pay WIFA's normal fees, reserves, and the prevailing interest rate at the time the loan is closed. Indiada's share of the interest is included on the unconsolidated income statement for comparative purposes.**

Supporting Schedules:

Recap Schedules:

**Indiada Water Company**  
 Test Year Ended December 31, 2009

**Schedule: H-1**  
**Title: Summary of Revenues by Customer**  
**Classification - Present and Proposed Rates**

Explanation:  
 Schedule comparing revenues by customer classification for  
 the Test Year, at present and proposed rates.

Required for: All Utilities   
 Class A   
 Class B   
 Class C   
 Class D   
 Specl Reqmt

Customer Classification	Revenues in the Test Year (a)		Proposed Increase (b)	
	Present Rates	Proposed Rates	Amount	%
All customers are residential				
5/8 x 3/4 inch	\$ 27,842	\$ 57,338	29,496	105.94%
1 inch	171	597	426	248.48%
<b>Total Water Revenues</b>	<b>\$ 28,013</b>	<b>\$ 57,935</b>	<b>\$ 29,922</b>	<b>106.81%</b>
Emergency Surcharge	\$ 869	\$ -	\$ (869)	-99.99%
Other Revenues	127	127	-	0.00%
<b>Total Revenues</b>	<b>\$ 29,009</b>	<b>\$ 58,062</b>	<b>\$ 29,053</b>	<b>100.15%</b>

Note: For combination utilities, above information should be presented in total and by department.

Supporting Schedules:  
 (a) H-2

Recap Schedules:  
 (b) A-1

Explanation:  
 Schedule comparing present rate schedules with proposed  
 rate schedule.

Required for: All Utilities	<input checked="" type="checkbox"/>
Class A	<input type="checkbox"/>
Class B	<input type="checkbox"/>
Class C	<input type="checkbox"/>
Class D	<input type="checkbox"/>
Spec'l Reqmt	<input type="checkbox"/>

(Note: Rates apply to both residential and commercial usage)

Description	Present Rate	Proposed Rate	% change
<b>MONTHLY USAGE CHARGE (includes first 1000 gallons)</b>		<b>(includes first 0 gallons)</b>	
5/8" x 3/4" Meter	\$ 15.00	\$ 37.87	152%
3/4" Meter	\$ 15.00	\$ 56.81	279%
1" Meter	\$ 15.00	\$ 94.68	531%
1-1/2" Meter	\$ 15.00	\$ 189.35	1162%
2" Meter	\$ 15.00	\$ 302.96	1920%
3" Meter	\$ 15.00	\$ 605.92	3939%
4" Meter	\$ 15.00	\$ 946.75	6212%
6" Meter	\$ 15.00	\$ 1,893.50	12523%
Gallons Included in Usage Charge	1,000	-	

EMERGENCY INTERIM SURCHARGE EFFECTIVE: OCTOBER 30, 2009  
 DECISION NO. 71321  
 DOCKET NO. W-2031A-09-0285  
 \$7.83 PER CUSTOMER PER MONTH

**COMMODITY CHARGE (EXCESS OF MINIMUM)**  
 3.50 Per 1,000 Gallons

**Commodity Charges Per 1,000 Gallons:**

5/8 x 3/4 - inch meter	Present Rate	Proposed Rate	% change
Tier one: 0 - 1,000 Gallons	\$ -	\$2.70	
Tier one: 1,001 - 3,000 Gallons	\$ 3.50	\$2.70	-23%
Tier two: 3,001 to 10,000 Gallons	\$ 3.50	\$4.86	39%
Tier three: All Gallons Over 10,000	\$ 3.50	\$8.75	150%
<b>3/4 - inch meter</b>			
Tier one: 0 - 1,000 Gallons	\$ -	\$2.70	
Tier one: 1001 - 3,000 Gallons	\$ 3.50	\$2.70	-23%
Tier two: 3,001 to 10,000 Gallons	\$ 3.50	\$4.86	39%
Tier three: All Gallons Over 10,000	\$ 3.50	\$8.75	150%
<b>One - inch meter</b>			
Tier one: 0 - 1,000 Gallons	\$ -	\$2.70	
Tier one: 1001 - 6,000 Gallons	\$ 3.50	\$2.70	-23%
Tier two: All Gallons Over 6,000	\$ 3.50	\$4.86	39%
<b>One and one half - inch meter</b>			
Tier one: 0 - 1,000 Gallons	\$ -	\$2.70	
Tier one: 1001 - 6,000 Gallons	\$ 3.50	\$2.70	-23%
Tier two: All Gallons Over 6,000	\$ 3.50	\$4.86	39%
<b>Two - inch meter</b>			
Tier one: 0 - 1,000 Gallons	\$ -	\$2.70	
Tier one: 1001 - 6,000 Gallons	\$ 3.50	\$2.70	-23%
Tier two: All Gallons Over 6,000	\$ 3.50	\$4.86	39%
<b>Three - inch meter</b>			
Tier one: 0 - 1,000 Gallons	\$ -	\$2.70	
Tier one: 1001 - 6,000 Gallons	\$ 3.50	\$2.70	-23%
Tier two: All Gallons Over 6,000	\$ 3.50	\$4.86	39%

Indiada Water Company  
 Test Year Ended December 31, 2009

Schedule: H-3  
 Title: Changes in Representative Rate  
 Schedules - Page 2 of 2

**Four - inch meter**

Tier one: 0 - 1,000 Gallons	\$	-	\$2.70	
Tier one: 1001 - 6,000 Gallons	\$	3.50	\$2.70	-23%
Tier two: All Gallons Over 6,000	\$	3.50	\$4.86	39%

**Six - inch meter**

Tier one: 0 - 1,000 Gallons	\$	-	\$2.70	
Tier one: 1001 - 6,000 Gallons	\$	3.50	\$2.70	-23%
Tier two: All Gallons Over 6,000	\$	3.50	\$4.86	39%

Description		Present Rate	Proposed Rate	% change
<b>SERVICE CHARGES</b>				
Establishment	\$	20.00	\$ 35.00	75.00%
Establishment (After Hours)		50.00	\$ 50.00	0.00%
Reconnection (Delinquent)		10.00	\$ 35.00	250.00%
Reconnection (After Hours)		40.00	\$ 50.00	25.00%
Meter Test (If Correct)		20.00	Cost	
Meter Reread (If Correct)		10.00	\$ 5.00	-50.00%
NSF Check Charge		10.00	\$ 35.00	250.00%
Deposit		NA	*	
Deposit Interest (Per Annum)		NA	*	
Deferred Payment (Per Month)		NA	**	
Late Charge (Per Month)		NA	**	
Re-establishment (Within 12 Month)	\$	50.00	***	
Main Extension		N/A	Cost	

MONTHLY SERVICE CHARGE  
 FOR FIRE SPRINKLER: N/A \*\*\*\*

Indiada Water Company  
 Test Year Ended December 31, 2009

Schedule: H-3  
 Title: Changes in Representative Rate  
 Schedules - Page 2 of 3

**SERVICE LINE AND METER INSTALLATION CHARGES**

Refundable Pursuant to AAC R14-2-405

Description	Present Rate	Proposed Rates			% change
		Service Line	Meter Charge	Total Charge	
5/8" x 3/4" Meter	\$ 100.00	\$ 400.00	\$ 100.00	\$ 500.00	400%
3/4" Meter	120.00	\$ 415.00	\$ 205.00	620.00	417%
1" Meter	200.00	\$ 465.00	\$ 265.00	730.00	265%
1-1/2" Meter	300.00	\$ 520.00	\$ 475.00	995.00	232%
2" Meter - Turbine	\$ 500.00	\$ 800.00	\$ 995.00	1,795.00	100%
2" Meter - Compound		\$ 800.00	\$ 1,840.00	2,640.00	
3" Meter - Turbine		\$ 1,015.00	\$ 1,620.00	2,635.00	100%
3" Meter - Compound		\$ 1,135.00	\$ 2,495.00	3,630.00	
4" Meter - Turbine		\$ 1,430.00	\$ 2,570.00	4,000.00	100%
4" Meter - Compound		\$ 1,610.00	\$ 3,545.00	5,155.00	
6" Meter - Turbine		\$ 2,150.00	\$ 4,925.00	7,075.00	100%
6" Meter - Compound		\$ 2,270.00	\$ 6,820.00	9,090.00	
8" Meter - Turbine		\$ 2,881.00	\$ 9,456.00	12,337.00	100%
8" Meter - Compound		\$ 3,860.54	\$ 18,155.52	22,016.06	

\* Per Commission Rule AAC R-14-2-403(B).

\*\* 1.50% of unpaid monthly balance.

\*\*\* Month off system times the monthly minimum per Commission rule AAC R14-2-403(D).

\*\*\*\* 1% of monthly minimum for a comparable sized meter connection, but no less than \$5.00 per month. The service charge for fire sprinklers is only applicable for service lines separate and distinct from the primary water service line.

Supporting Schedules:

Explanation:  
 Schedule(s) comparing typical customer bills at varying  
 consumption levels at present and proposed rates.

5/8" x 3/4" meter  
 (Note: Rates apply to both residential and commercial usage)

Required for: All Utilities   
 Class A   
 Class B   
 Class C   
 Class D   
 Specl Reqmt

Monthly Consumption	Present Bill W/O Surcharge	Present Bill With Surcharge	Proposed Bill W/O Surcharge	Percent Increase W/O Surcharge	Percent Increase With Surcharge
-	\$ 15.00	\$ 22.83	\$ 37.87	152.47%	65.88%
1,000	15.00	22.83	40.57	170.47%	77.70%
2,000	18.50	26.33	43.27	133.89%	64.34%
3,000	22.00	29.83	45.97	108.95%	54.11%
4,000	25.50	33.33	50.83	99.33%	52.51%
5,000	29.00	36.83	55.69	92.03%	51.21%
6,000	32.50	40.33	60.55	86.31%	50.14%
7,000	36.00	43.83	65.41	81.69%	49.24%
8,000	39.50	47.33	70.27	77.90%	48.47%
9,000	43.00	50.83	75.13	74.72%	47.81%
10,000	46.50	54.33	79.99	72.02%	47.23%
15,000	64.00	71.83	123.76	93.38%	72.30%
20,000	81.50	89.33	167.53	105.56%	87.54%
25,000	99.00	106.83	211.30	113.43%	97.79%
50,000	186.50	194.33	430.15	130.64%	121.35%
75,000	274.00	281.83	649.00	136.86%	130.28%
100,000	361.50	369.33	867.85	140.07%	134.98%
125,000	449.00	456.83	1,086.70	142.03%	137.88%
150,000	536.50	544.33	1,305.55	143.35%	139.85%
175,000	624.00	631.83	1,524.40	144.29%	141.27%
200,000	711.50	719.33	1,743.25	145.01%	142.34%

Supporting Schedules:

Explanation:  
 Schedule(s) comparing typical customer bills at varying  
 consumption levels at present and proposed rates.

Required for: All Utilities  
 Class A  
 Class B  
 Class C  
 Class D  
 Specl Reqmt

X

1 inch meter

(Note: Rates apply to both residential and commercial usage)

Monthly Consumption	Present Bill W/O Surcharge	Present Bill With Surcharge	Proposed Bill W/O Surcharge	Percent Increase W/O Surcharge	Percent Increase With Surcharge
-	\$ 15.00	\$ 22.83	\$ 94.68	531.17%	315%
1,000	15.00	22.83	97.38	549.17%	327%
2,000	18.50	26.33	100.08	440.95%	280%
3,000	22.00	29.83	102.78	367.16%	245%
4,000	25.50	33.33	105.48	313.63%	216%
5,000	29.00	36.83	108.18	273.02%	194%
6,000	32.50	40.33	110.88	241.15%	175%
7,000	36.00	43.83	115.74	221.49%	164%
8,000	39.50	47.33	120.60	205.30%	155%
9,000	43.00	50.83	125.46	191.76%	147%
10,000	46.50	54.33	130.32	180.25%	140%
15,000	64.00	71.83	154.62	141.59%	115%
20,000	81.50	89.33	178.92	119.53%	100%
25,000	99.00	106.83	203.22	105.27%	90%
40,000	151.50	159.33	276.12	82.25%	73%
50,000	186.50	194.33	324.72	74.11%	67%
75,000	274.00	281.83	446.22	62.85%	58%
100,000	361.50	369.33	567.72	57.04%	54%
125,000	449.00	456.83	689.22	53.50%	51%
150,000	536.50	544.33	810.72	51.11%	49%
175,000	624.00	631.83	932.22	49.39%	48%
200,000	711.50	719.33	1,053.72	48.10%	46%

Supporting Schedules:

Explanation:  
 Schedule(s) showing billing activity by block for each rate  
 schedule.

5/8 x 3/4 inch meter - Residential

Required for: All Utilities  
 Class A  
 Class B  
 Class C  
 Class D  
 Specl Reqmt

X

Block	Number of Bills by Block	Consumption By Blocks	Cumulative Bills		Cumulative Consumption	
			No.	% of Total	Amount	% of Total
-	26	-	26	3.93%	-	0.00%
1 to 1,000	26	13,000	52	7.87%	13,000	0.23%
1,001 to 2,000	71	106,500	123	18.61%	119,500	2.07%
2,001 to 3,000	67	167,500	190	28.74%	287,000	4.97%
3,001 to 4,000	79	276,500	269	40.70%	563,500	9.76%
4,001 to 5,000	47	211,500	316	47.81%	775,000	13.43%
5,001 to 6,000	52	286,000	368	55.67%	1,061,000	18.39%
6,001 to 7,000	33	214,500	401	60.67%	1,275,500	22.10%
7,001 to 8,000	35	262,500	436	65.96%	1,538,000	26.65%
8,001 to 9,000	26	221,000	462	69.89%	1,759,000	30.48%
9,001 to 10,000	30	285,000	492	74.43%	2,044,000	35.42%
10,001 to 12,000	35	385,000	527	79.73%	2,429,000	42.09%
12,001 to 14,000	18	234,000	545	82.45%	2,663,000	46.14%
14,001 to 16,000	18	270,000	563	85.17%	2,933,000	50.82%
16,001 to 18,000	16	272,000	579	87.59%	3,205,000	55.54%
18,001 to 20,000	9	171,000	588	88.96%	3,376,000	58.50%
20,001 to 25,000	27	607,500	615	93.04%	3,983,500	69.03%
25,001 to 30,000	16	440,000	631	95.46%	4,423,500	76.65%
30,001 to 35,000	10	325,000	641	96.97%	4,748,500	82.28%
35,001 to 40,000	9	337,500	650	98.34%	5,086,000	88.13%
40,001 to 50,000	3	135,000	653	98.79%	5,221,000	90.47%
50,001 to 60,000	1	55,000	654	98.94%	5,276,000	91.42%
60,001 to 70,000	3	195,000	657	99.39%	5,471,000	94.80%
70,001 to 80,000	4	300,000	661	100.00%	5,771,000	100.00%
80,001 to 90,000	-	-	661	100.00%	5,771,000	100.00%
90,001 to 100,000	-	-	661	100.00%	5,771,000	100.00%
>100,000	-	-	661	100.00%	5,771,000	100.00%
	661	5,771,000				

Average Number of Customers      55  
 Average Consumption                      8,731  
 Median Consumption                        5,260

Required for: All Utilities  
 Class A  
 Class B  
 Class C  
 Class D  
 Specl Reqmt

X

Explanation:  
 Schedule(s) showing billing activity by block for each rate schedule.

1 inch meter - Residential

Note: There are no commercial customers on 1 inch meters.

Block	Number of Bills by Block	Consumption By Blocks	Cumulative Bills		Cumulative Consumption	
			No.	% of Total	Amount	% of Total
-	-	-	-	0.00%	-	0.00%
1 to 1,000	-	-	-	0.00%	-	0.00%
1,001 to 2,000	1	1,500	1	20.00%	1,500	4.62%
2,001 to 3,000	2	5,000	3	60.00%	6,500	20.00%
3,001 to 4,000	1	3,500	4	80.00%	10,000	30.77%
4,001 to 5,000	-	-	4	80.00%	10,000	30.77%
5,001 to 6,000	-	-	4	80.00%	10,000	30.77%
6,001 to 7,000	-	-	4	80.00%	10,000	30.77%
7,001 to 8,000	-	-	4	80.00%	10,000	30.77%
8,001 to 9,000	-	-	4	80.00%	10,000	30.77%
9,001 to 10,000	-	-	4	80.00%	10,000	30.77%
10,001 to 12,000	-	-	4	80.00%	10,000	30.77%
12,001 to 14,000	-	-	4	80.00%	10,000	30.77%
14,001 to 16,000	-	-	4	80.00%	10,000	30.77%
16,001 to 18,000	-	-	4	80.00%	10,000	30.77%
18,001 to 20,000	-	-	4	80.00%	10,000	30.77%
20,001 to 25,000	1	22,500	5	100.00%	32,500	100.00%
25,001 to 30,000	-	-	5	100.00%	32,500	100.00%
30,001 to 35,000	-	-	5	100.00%	32,500	100.00%
35,001 to 40,000	-	-	5	100.00%	32,500	100.00%
40,001 to 50,000	-	-	5	100.00%	32,500	100.00%
50,001 to 60,000	-	-	5	100.00%	32,500	100.00%
60,001 to 70,000	-	-	5	100.00%	32,500	100.00%
70,001 to 80,000	-	-	5	100.00%	32,500	100.00%
80,001 to 90,000	-	-	5	100.00%	32,500	100.00%
90,001 to 100,000	-	-	5	100.00%	32,500	100.00%
>100,000	-	-	5	100.00%	32,500	100.00%
5			32,500			

Average Number of Customers      0.42  
 Average Consumption                      6,500  
 Median Consumption                        2,635

**Indiada Water Company**  
 Test Year Ended December 31, 2009

**Schedule: H-5**  
**Title: Bill Count**  
**Page 3 of 3**

Explanation:  
 Schedule(s) showing billing activity by block for each rate schedule.

Required for: All Utilities   
 Class A   
 Class B   
 Class C   
 Class D   
 Specl Reqmt

Amount of Surcharge \$ 7.83 per customer per month  
 Surcharge Approved in Decision 71321, October 30, 2009

	<u># of Bills Nov and Dec 2009</u>	<u>Surcharge</u>	<u>Surcahrge Revenue</u>
Residential	111	\$ 7.83	\$ 869.13
Commercial	-	\$ 7.83	\$ -
<b>Indiada Total Surcharge Revenue</b>		\$	<b>869.13</b>

# **EXHIBIT 3**

COMPANY NAME: <u>Indiada Water Company</u>	
Name of System:	ADEQ Public Water System Number: 02-020

**WATER USE DATA SHEET BY MONTH FOR CALENDAR YEAR 2009**

MONTH	NUMBER OF CUSTOMERS	GALLONS SOLD (Thousands)	GALLONS PUMPED (Thousands)	GALLONS PURCHASED (Thousands)
JANUARY	54	299	243	124
FEBRUARY	55	301	402	11
MARCH	55	436	505	12
APRIL	56	527	595	13
MAY	55	801	784	41
JUNE	55	703	676	37
JULY	57	567	576	10
AUGUST	56	511	507	12
SEPTEMBER	55	618	629	14
OCTOBER	55	358	412	20
NOVEMBER	56	485	506	26
DECEMBER	55	244	320	14
<b>TOTALS →</b>		<b>5850</b>	6156	334

What is the level of arsenic for each well on your system? <0.001 mg/l  
(If more than one well, please list each separately.)

If system has fire hydrants, what is the fire flow requirement? N/A GPM for \_\_\_ hrs

If system has chlorination treatment, does this treatment system chlorinate continuously?  
 Yes                       No

Is the Water Utility located in an ADWR Active Management Area (AMA)?  
 Yes                       No

Does the Company have an ADWR Gallons Per Capita Per Day (GPCPD) requirement?  
 Yes                       No

If yes, provide the GPCPD amount: \_\_\_\_\_

**Note: If you are filing for more than one system, please provide separate data sheets for each system.                      See Accountant's Compilation Report**

# **EXHIBIT 4**

**WATER COMPANY PLANT DESCRIPTION**

**WELLS**

ADWR ID Number*	Pump Horsepower	Pump Yield (gpm)	Casing Depth (Feet)	Casing Diameter (inches)	Meter Size (inches)	Year Drilled
55-805790 Davis Well	1	12	55	8	1	1970
55-805791 North Well	2	20	120	8	1	1966
55-805792 East Well	1.5	20	120	8	2	1967

\* Arizona Department of Water Resources Identification Number

**OTHER WATER SOURCES**

Name or Description	Capacity (gpm)	Gallons Purchased or Obtained (in thousands)
Antelope Run Water Company		334

**BOOSTER PUMPS**

Horsepower	Quantity
2.0	1

**FIRE HYDRANTS**

Quantity Standard	Quantity Other

**STORAGE TANKS**

Capacity	Quantity
12,000 gal	1

**PRESSURE TANKS**

Capacity	Quantity
1,000 gal	2
85 gal	2

Company Name: Indiada Water Company Inc.	Test Year Ended: 31-Dec-09
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**WATER COMPANY PLANT DESCRIPTION CONTINUED**

**MAINS**

Size (in inches)	Material	Length (in feet)
2	PVC	1,000
3	AC/PVC	10,000
4	AC	2,000
5		
6		
8		
10		
12		

**CUSTOMER METERS**

Size (in inches)	Quantity
5/8 x 3/4	56
3/4	
1	1
1 1/2	
2	
Comp. 3	
Turbo 3	
Comp. 4	
Turbo 4	
Comp. 6	
Turbo 6	

For the following three items, please list the utility owned assets in each category.

**TREATMENT EQUIPMENT:**

2 chlorinators

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**STRUCTURES:**

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**OTHER:**

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# **EXHIBIT 5**

**Arizona Department of Environmental Quality**  
 Drinking Water Monitoring and Protection Unit  
 Mail Code 5415B-2  
 1110 West Washington Street  
 Phoenix, AZ 85007

**Drinking Water Compliance Status Report**

<b>System Name</b> INDIADA WATER COMPANY	<b>System Type</b> <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-transient Non-community <input type="checkbox"/> Transient Non-community	<b>Is system consecutive?</b> <input type="checkbox"/> Yes, to PWS # <input checked="" type="checkbox"/> No
<b>System ID #</b> 02020		

<b>Overall compliance status</b>	<input type="checkbox"/> No major deficiencies	<input checked="" type="checkbox"/> Major deficiencies
<b>Monitoring and Reporting status</b>	<input type="checkbox"/> No major deficiencies	<input checked="" type="checkbox"/> Major deficiencies
Comments: The system has not submitted any Lead and Copper (Pb/Cu) results since 2005. They are required to take 10 Pb/Cu samples per year between June 1 and September 30.		

<b>Operation and Maintenance status</b>	<input checked="" type="checkbox"/> No major deficiencies	<input type="checkbox"/> Major deficiencies
<b>Date of last Sanitary Survey</b>	3-24-09	<b>Inspector</b>
John Eyre, SRO		
Major unresolved/ongoing operation and maintenance deficiencies: <input type="checkbox"/> unable to maintain 20psi <input type="checkbox"/> cross connection/backflow problems <input type="checkbox"/> treatment deficiencies <input type="checkbox"/> certified operator <input type="checkbox"/> inadequate storage <input type="checkbox"/> surface water treatment rule <input type="checkbox"/> a/c/aoc <input type="checkbox"/> other =		
Comments: None		

<b>Is an ADEQ administrative order in effect?</b>	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Comments: None		

System Information	
Population Served	120
Service Connections	54
Number of Entry Points to the Distribution System	3
Number of Sources	3
Initial Monitoring Year	1995
Monitoring Assistance Program (MAP) System	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

<b>Evaluation completed by</b>	Donna Calderon, Manager Drinking Water Monitoring and Protection Unit		
<b>Phone</b>	602-771-4641	<b>Date</b>	June 9, 2009
<input type="checkbox"/>	Based upon data submitted by the water system, ADEQ has determined that this system is currently delivering water that meets water quality standards required by 40 CFR 141/Arizona Administrative Code, Title 18, Chapter 4.		
<input checked="" type="checkbox"/>	Based upon the monitoring and reporting deficiencies noted above, ADEQ cannot determine if this system is currently delivering water that meets water quality standards required by 40 CFR 141/Arizona Administrative Code, Title 18, Chapter 4.		
<input type="checkbox"/>	Based upon the operation and maintenance deficiencies noted above, ADEQ cannot determine if this system is currently delivering water that meets water quality standards required by 40 CFR 141/Arizona Administrative Code, Title 18, Chapter 4.		

*This compliance status report does not guarantee the water quality for this system in the future, and does not reflect the status of any other water system owned by this utility company.*

Arizona Department of Environmental Quality  
**Drinking Water Lead and Copper Analysis Reporting Form**

>>>>> System Information <<<<<<

PWS ID# 02-020 \_\_\_\_\_ PWS Name: Indiada Water (520) 792-0377  
 Elaine Byfield \_\_\_\_\_ Owner/Contact Phone Number  
 Owner/Contact Person \_\_\_\_\_ Owner/Contact Fax Number

SAMPLE COLLECTION POINT/ID: \_\_\_\_\_  
 Zone/Distribution  
 Other - Direct from source  
 Surface  
 Well

Contaminant: \_\_\_\_\_ Lead (Pb) \_\_\_\_\_ Copper (Cu) \_\_\_\_\_  
 Action Level: 0.015 mg/l 200.9 1.3 mg/l  
 Analysis Methods: \_\_\_\_\_  
 Sample Type: \_\_\_\_\_

Sample Type:  
 Triennial (3YR) Compliance  
 Annual Compliance  
 6 Month Initial Compliance

Specimen #	Collection Point	Sample Date	Analysis Completion Date	Lead (mg/L) (1030) Result	Analysis Completion Date	Copper (mg/L) (1022) Result
09H0566-01(8C)	1490 Loma Ln	08/12/2009	09/09/2009	0.0043	09/02/2009	0.053
09H0566-02(8C)	5658 Calle Matate	08/12/2009	09/09/2009	ND	09/02/2009	0.036
09H0566-03(8C)	5363 Calle Matate	08/12/2009	09/09/2009	ND	09/02/2009	0.18
09H0566-04(8C)	5267 Calle Coro	08/12/2009	09/09/2009	0.0041	09/02/2009	0.17
09H0566-05(8C)	1221 Ramsey Canyon Rd	08/12/2009	09/09/2009	0.0026	09/02/2009	0.23
09H0566-06(8C)	5517 Calle Mano	08/12/2009	09/09/2009	0.0030	09/02/2009	ND
09H0566-07(8C)	1269 Calle Coro	08/12/2009	09/09/2009	0.0033	09/02/2009	0.16
09H0566-08(8C)	1531 Calle Coro	08/12/2009	09/09/2009	0.0044	09/02/2009	0.19
09H0566-09(8C)	5574 Calle Encina	08/12/2009	09/09/2009	0.0040	09/02/2009	0.25

I hereby certify that the information provided in this report is accurate and correct to the best of my knowledge.  
 Printed Name and Phone Number of Lab Contact: Terri L. Garcia, Technical Director Phone # (520) 882-5880

Signature: *Terri L. Garcia*  
 Mail completed form to: **ADEQ Water Quality Compliance Data Unit (MC 5415B-1), 1110 W. Washington St. Phoenix, AZ 85007.**  
 For questions call: (602) 771-4513 or within AZ 1-800-234-5677 Ext. 4513. Fax: (602) 771-4505

Copies of this form are available at <http://www.azdeq.gov/function/forms/appswater.html#sdw>, scroll down to laboratory reporting forms and click on DWAR 8: DW Lead & Copper Analysis Report.  
 Revised: 8/2008

Arizona Department of Environmental Quality  
**Drinking Water Lead and Copper Analysis Reporting Form**

>>>> System Information <<<<<

PWS ID# 02-020 PWS Name: Indiada Water (520) 792-0377  
 Elaine Byfield (520) 623-5172 Owner/Contact Fax Number  
 Owner/Contact Person Owner/Contact Phone Number

SAMPLE COLLECTION POINT/ID:  
 Zone/Distribution  
 Other - Direct from source  
 Surface  
 Well

Contaminant Action Level Lead (Pb) Copper (Cu)  
 0.015 mg/l 200.9 1.3 mg/l 200.7

Analysis Methods  
 Sample Type:

Sample Type:  
 Triennial (3YR) Compliance  
 Annual Compliance  
 6 Month Initial Compliance

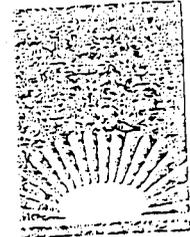
Specimen #	Collection Point	Sample Date	Analysis Completion Date	Lead (mg/L) (1030) Result	Analysis Completion Date	Copper (mg/L) (1022) Result

Lab ID# AZ0066 90th % Calc: \_\_\_\_\_

I hereby certify that the information provided in this report is accurate and correct to the best of my knowledge.  
 Printed Name and Phone Number of Lab Contact: Terri L. Garcia, Technical Director Phone # (520) 882-5880

Signature: Terri L. Garcia  
 Mail completed form to: **ADEQ Water Quality Compliance Data Unit (MC 5415B-1), 1110 W. Washington St. Phoenix, AZ 85007.**  
 For questions call: **(602) 771-4513 or within AZ 1-800-234-5677 Ext. 4513. Fax: (602) 771-4505**

Copies of this form are available at <http://www.azdeq.gov/function/forms/appswater.html#sdw>, scroll down to laboratory reporting forms and click on DWAR 8: DW Lead & Copper Analysis Report.  
 Revised: 8/2008



TURNER  
LABORATORIES INC.

Turner Laboratories W.O. #: 09H0566

Delivered by: CLIENT

- 1. Shipping container/cooler in good condition?  Yes  No  Not Present
- 2. Custody seals intact on sample bottles?  Yes  No  Not Present
- 3. Chain of custody present?  Yes  No
- 4. COC agrees with sample labels?  Yes  No
- 5. Samples in proper container/bottle?  Yes  No
- 6. Sample container intact?  Yes  No
- 7. Sufficient sample volume for requested tests?  Yes  No
- 8. Samples received within holding times?  Yes  No
- 9. VOA vials received with no headspace?  Yes  No  No Vials
- 10. Bacti bottles received with appropriate headspace?  Yes  Not Applicable  Above 100ml  Below 100ml

Additional Comments:

# CHAIN OF CUSTODY/LABORATORY ANALYSIS REQUEST FORM

2445 N. Coyote Drive, Suite 104  
 Tucson, Arizona 85745  
 (520) 882-5880  
 Fax: (520) 882-9788  
 www.turnerlabs.com

TURNER WORK ORDER # 09H0566 DATE \_\_\_\_\_ PAGE \_\_\_\_\_ OF \_\_\_\_\_

<p>PROJECT NAME _____ # <u>02-020</u></p> <p>CONTACT NAME <u>Elaine Bufield</u></p> <p>COMPANY NAME <u>Indiada Water</u></p> <p>ADDRESS <u>PO Box 85160 Tucson 85754</u></p> <p>PHONE <u>623-5172</u> FAX <u>792-0377</u></p> <p>SAMPLER'S SIGNATURE <u>[Signature]</u></p>	<p>NUMBER OF CONTAINERS _____</p>	<p style="text-align: center;"><b>CIRCLE ANALYSIS REQUESTED AND/OR CHECK THE APPROPRIATE BOX</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;"><input type="checkbox"/> Acids</td> <td style="width: 15%;"><input type="checkbox"/> Volatile Organics 624/524.2/8260</td> <td style="width: 15%;"><input type="checkbox"/> TTHMS</td> <td style="width: 15%;"><input type="checkbox"/> HAAS</td> <td style="width: 15%;"><input type="checkbox"/> Pesticides 8081</td> <td style="width: 15%;"><input type="checkbox"/> PCBs 8082</td> <td style="width: 15%;"><input type="checkbox"/> Total Petroleum Hydrocarbons 1664A</td> <td style="width: 15%;"><input type="checkbox"/> Oil and Grease 1664A</td> <td style="width: 15%;"><input type="checkbox"/> Cray. 1664A</td> <td style="width: 15%;"><input type="checkbox"/> VOA</td> <td style="width: 15%;"><input type="checkbox"/> TCLP Analysis Pest./Herb.</td> <td style="width: 15%;"><input type="checkbox"/> Metals Total</td> <td style="width: 15%;"><input type="checkbox"/> Cyanide</td> <td style="width: 15%;"><input type="checkbox"/> WAD</td> <td style="width: 15%;"><input type="checkbox"/> SDWA/INORGANICS PRIMARY</td> <td style="width: 15%;"><input type="checkbox"/> MPN</td> <td style="width: 15%;"><input type="checkbox"/> pH</td> <td style="width: 15%;"><input type="checkbox"/> COD</td> <td style="width: 15%;"><input type="checkbox"/> TSS</td> <td style="width: 15%;"><input type="checkbox"/> BOD</td> </tr> <tr> <td><input type="checkbox"/> Total</td> <td><input type="checkbox"/> Priority Pollutants</td> <td><input type="checkbox"/> Dissolved</td> <td><input type="checkbox"/> TCLP</td> <td><input type="checkbox"/> VOA</td> <td><input type="checkbox"/> Semi-VOA</td> <td><input type="checkbox"/> Pest./Herb.</td> <td><input type="checkbox"/> TCLP Analysis</td> <td><input type="checkbox"/> Total</td> <td><input type="checkbox"/> Priority Pollutants</td> <td><input type="checkbox"/> Cyanide</td> <td><input type="checkbox"/> WAD</td> <td><input type="checkbox"/> SDWA/INORGANICS SECONDARY</td> <td><input type="checkbox"/> MPN</td> <td><input type="checkbox"/> pH</td> <td><input type="checkbox"/> COD</td> <td><input type="checkbox"/> TSS</td> <td><input type="checkbox"/> BOD</td> <td colspan="2" style="text-align: center; vertical-align: middle;"><u>CuPb</u></td> </tr> </table>	<input type="checkbox"/> Acids	<input type="checkbox"/> Volatile Organics 624/524.2/8260	<input type="checkbox"/> TTHMS	<input type="checkbox"/> HAAS	<input type="checkbox"/> Pesticides 8081	<input type="checkbox"/> PCBs 8082	<input type="checkbox"/> Total Petroleum Hydrocarbons 1664A	<input type="checkbox"/> Oil and Grease 1664A	<input type="checkbox"/> Cray. 1664A	<input type="checkbox"/> VOA	<input type="checkbox"/> TCLP Analysis Pest./Herb.	<input type="checkbox"/> Metals Total	<input type="checkbox"/> Cyanide	<input type="checkbox"/> WAD	<input type="checkbox"/> SDWA/INORGANICS PRIMARY	<input type="checkbox"/> MPN	<input type="checkbox"/> pH	<input type="checkbox"/> COD	<input type="checkbox"/> TSS	<input type="checkbox"/> BOD	<input type="checkbox"/> Total	<input type="checkbox"/> Priority Pollutants	<input type="checkbox"/> Dissolved	<input type="checkbox"/> TCLP	<input type="checkbox"/> VOA	<input type="checkbox"/> Semi-VOA	<input type="checkbox"/> Pest./Herb.	<input type="checkbox"/> TCLP Analysis	<input type="checkbox"/> Total	<input type="checkbox"/> Priority Pollutants	<input type="checkbox"/> Cyanide	<input type="checkbox"/> WAD	<input type="checkbox"/> SDWA/INORGANICS SECONDARY	<input type="checkbox"/> MPN	<input type="checkbox"/> pH	<input type="checkbox"/> COD	<input type="checkbox"/> TSS	<input type="checkbox"/> BOD	<u>CuPb</u>	
<input type="checkbox"/> Acids	<input type="checkbox"/> Volatile Organics 624/524.2/8260	<input type="checkbox"/> TTHMS	<input type="checkbox"/> HAAS	<input type="checkbox"/> Pesticides 8081	<input type="checkbox"/> PCBs 8082	<input type="checkbox"/> Total Petroleum Hydrocarbons 1664A	<input type="checkbox"/> Oil and Grease 1664A	<input type="checkbox"/> Cray. 1664A	<input type="checkbox"/> VOA	<input type="checkbox"/> TCLP Analysis Pest./Herb.	<input type="checkbox"/> Metals Total	<input type="checkbox"/> Cyanide	<input type="checkbox"/> WAD	<input type="checkbox"/> SDWA/INORGANICS PRIMARY	<input type="checkbox"/> MPN	<input type="checkbox"/> pH	<input type="checkbox"/> COD	<input type="checkbox"/> TSS	<input type="checkbox"/> BOD																							
<input type="checkbox"/> Total	<input type="checkbox"/> Priority Pollutants	<input type="checkbox"/> Dissolved	<input type="checkbox"/> TCLP	<input type="checkbox"/> VOA	<input type="checkbox"/> Semi-VOA	<input type="checkbox"/> Pest./Herb.	<input type="checkbox"/> TCLP Analysis	<input type="checkbox"/> Total	<input type="checkbox"/> Priority Pollutants	<input type="checkbox"/> Cyanide	<input type="checkbox"/> WAD	<input type="checkbox"/> SDWA/INORGANICS SECONDARY	<input type="checkbox"/> MPN	<input type="checkbox"/> pH	<input type="checkbox"/> COD	<input type="checkbox"/> TSS	<input type="checkbox"/> BOD	<u>CuPb</u>																								
<p>1. RELINQUISHED BY: <u>[Signature]</u>                  Signature _____                  Printed Name <u>Indiada Water</u>                  Firm _____                  Date/Time <u>8/14/09 13:05</u></p>	<p>2. RECEIVED BY: _____                  Signature _____                  Printed Name _____                  Firm _____                  Date/Time _____</p>	<p>3. RELINQUISHED BY: _____                  Signature _____                  Printed Name _____                  Firm _____                  Date/Time _____</p>	<p>4. RECEIVED BY: _____                  Signature <u>[Signature]</u>                  Printed Name <u>TURNER LABORATORIES, INC.</u>                  Firm _____                  Date/Time <u>8-14-09 13:05</u></p>																																							
<p>TURNAROUND REQUIREMENTS:</p> <p>Standard (approx. 10 days)* _____</p> <p>Next Day _____ 2 Day _____ 5 Day* _____</p> <p>Fax Preliminary Results _____</p> <p>Requested Report Date _____</p> <p>* Working Days</p>		<p>REPORT REQUIREMENTS:</p> <p>I. Routine Report _____</p> <p>II. Report (includes DUP, MS, MSD, as required, may be charged as samples) _____</p> <p>III. Date Validation Report (Includes All Raw Data) Add 10% to invoice _____</p>		<p>INVOICE INFORMATION:</p> <p>Account _____ Y _____ N _____</p> <p>P.O. # _____</p> <p>Bill to: _____</p> <p>Total Containers <u>9</u></p> <p>Temperature <u>30</u></p> <p>Wet Ice <input type="checkbox"/> Blue Ice <input type="checkbox"/></p>		<p>SPECIAL INSTRUCTIONS/COMMENTS:</p> <p>Compliance Analysis: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>ADEQ Forms: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Mail ADEQ Forms: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>																																				

DISTRIBUTION: WHITE - return to originator      PINK - retained by originator      See back of pink copy for general terms and conditions/limits of liability.

Arizona Department of Environmental Quality  
**Drinking Water Lead and Copper Analysis Reporting Form**

>>>> System Information <<<<<

PWS ID# 02-020 PWS Name: Indiada Water  
 Elaine Byfield (520) 623-5172  
 Owner/Contact Person Owner/Contact Phone Number  
 Owner/Contact Fax Number (520) 792-0377

SAMPLE COLLECTION POINT/ID: \_\_\_\_\_  
 Zone/Distribution  
 Other - Direct from source  
 Surface  
 Well

Contaminant: \_\_\_\_\_  
 Action Level: \_\_\_\_\_  
 Analysis Methods: \_\_\_\_\_  
 Sample Type: \_\_\_\_\_

Copper (Cu): \_\_\_\_\_  
 1.3 mg/l  
 200.7

Lead (Pb): \_\_\_\_\_  
 0.015 mg/l  
 200.9

Sample Type:  
 Triennial (3 YR) Compliance  
 Annual Compliance  
 6 Month Initial Compliance

Specimen #	Collection Point	Sample Date	Analysis Completion Date	Lead (mg/L) (1030) Result	Analysis Completion Date	Copper (mg/L) (1022) Result
09H0626-01(8C)	5520 Calle Mano	08/17/2009	08/24/2009	0.0035	08/21/2009	0.15

90th % Calc: \_\_\_\_\_  
 Lab ID# AZ0066

I hereby certify that the information provided in this report is accurate and correct to the best of my knowledge.  
 Printed Name and Phone Number of Lab Contact: Terri L. Garcia, Technical Director

Signature: Terri L. Garcia  
 Phone # (520) 882-5880  
 Mail completed form to: **ADEQ Water Quality Compliance Data Unit (MC 5415B-1), 1110 W. Washington St. Phoenix, AZ 85007.**  
 For questions call: (602) 771-4513 or within AZ 1-800-234-5677 Ext. 4513. Fax: (602) 771-4505

Copies of this form are available at <http://www.azdeq.gov/function/forms/appswater.html#sdw>, scroll down to laboratory reporting forms and click on DWAR 8: DW Lead & Copper Analysis Report.  
 Revised: 8/2008

Turner Laboratories W.O. #: 09H0626

Delivered by: CLINT



1. Shipping container/cooler in good condition?  Yes  No  Not Present
2. Custody seals intact on sample bottles?  Yes  No  Not Present
3. Chain of custody present?  Yes  No
4. COC agrees with sample labels?  Yes  No
5. Samples in proper container/bottle?  Yes  No
6. Sample container intact?  Yes  No
7. Sufficient sample volume for requested tests?  Yes  No
8. Samples received within holding times?  Yes  No
9. VOA vials received with no headspace?  Yes  No  No Vials
10. Bacti bottles received with appropriate headspace?  Yes  Above 100ml  
 Not Applicable  Below 100ml

Additional Comments:

2445 N. Coyote Drive, Suite 104  
 Tucson, Arizona 85745  
 (520) 882-5880  
 Fax: (520) 882-9788  
 www.turnerlabs.com



# CHAIN OF CUSTODY/LABORATORY ANALYSIS REQUEST FORM

TURNER WORK ORDER # 09H0626 DATE \_\_\_\_\_ PAGE 1 OF 1

PROJECT NAME CONTACT NAME <u>Elaine Bufield</u> COMPANY NAME <u>Indiada Water Co.</u> ADDRESS <u>PO Box 85160 Tucson, 85754</u> PHONE <u>623-5172</u> FAX <u>792-0371</u>		NUMBER OF CONTAINERS # <u>02-020</u>	
SAMPLER'S SIGNATURE <u>5520 Calle Mano</u>		SAMPLE MATRIX <u>DW</u>	
SAMPLE I.D.	LAB I.D.	DATE	TIME
		<u>8/17/09</u>	<u>2:45P</u>

<input type="checkbox"/> Acids <input type="checkbox"/> Base Neutrals <input type="checkbox"/> Volatile Organics <input type="checkbox"/> 625/8270 <input type="checkbox"/> TTHMS <input type="checkbox"/> HAA5 <input type="checkbox"/> Pesticides <input type="checkbox"/> 8081 <input type="checkbox"/> PCBs <input type="checkbox"/> 8082 <input type="checkbox"/> Total Petroleum Hydrocarbons <input type="checkbox"/> 1664A <input type="checkbox"/> 1664A <input type="checkbox"/> Oil and Grease <input type="checkbox"/> Cray 1664A <input type="checkbox"/> VOA <input type="checkbox"/> TCLP Analysis <input type="checkbox"/> Sem-VOA <input type="checkbox"/> Pesi/Herb <input type="checkbox"/> Metals <input type="checkbox"/> Total <input type="checkbox"/> Priority Pollutants <input type="checkbox"/> Cyanide <input type="checkbox"/> Amen. <input type="checkbox"/> WAD <input type="checkbox"/> SDWA-INORGANICS <input type="checkbox"/> PRIMARY <input type="checkbox"/> SECONDARY <input type="checkbox"/> Coliform <input type="checkbox"/> Coliform <input type="checkbox"/> pH <input type="checkbox"/> MPN <input type="checkbox"/> COD <input type="checkbox"/> TSS <input type="checkbox"/> BOD	CIRCLE ANALYSIS REQUESTED AND/OR CHECK THE APPROPRIATE BOX
---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------

1. RELINQUISHED BY: Signature: <u>[Signature]</u> Printed Name: <u>EILEEN DELANEY</u> Firm: <u>Indiada Water Co</u> Date/Time: <u>8-18-09 10:19</u>	RECEIVED BY: Signature: _____ Printed Name: _____ Firm: _____ Date/Time: _____	TURNAROUND REQUIREMENTS: Standard (approx. 10 days)* Next Day ___ 2 Day ___ 5 Day* Fax Preliminary Results Requested Report Date _____ * Working Days	REPORT REQUIREMENTS: I. Routine Report II. Report (includes DUP, MS, MSD, as required, may be charged as samples) III. Date Validation Report (Includes All Raw Data) Add 10% to invoice	INVOICE INFORMATION: Account ___ Y ___ N P.O. # _____ Bill to: _____ Total Containers <u>1</u> Temperature <u>25</u> <input type="checkbox"/> Wet Ice <input type="checkbox"/> Blue Ice	SAMPLE RECEIPT:
-----------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------

3. RELINQUISHED BY: Signature: _____ Printed Name: _____ Firm: _____ Date/Time: _____	RECEIVED BY: Signature: <u>[Signature]</u> Printed Name: <u>STEPHEN LADSON</u> Firm: <u>TURNER LABORATORIES, INC.</u> Date/Time: <u>8/18/09 10:19</u>	* LEGEND ST = STORMWATER SL = SOIL SD = SOLID SG = SLUDGE WW = WASTEWATER GW = GROUNDWATER DW = DRINKING WATER	SPECIAL INSTRUCTIONS/COMMENTS: Compliance Analysis: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No ADEQ Forms: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Mail ADEQ Forms: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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DISTRIBUTION: WHITE - return to originator PINK - retained by originator See back of pink copy for general terms and conditions/limits of liability.

Arizona Department of Environmental Quality  
**Drinking Water Lead and Copper Analysis Reporting Form**

>>>> System Information <<<<

PWS ID# 02-020

PWS Name: Indiada Water

Keith Dojaquez  
 Owner/Contact Person

(520) 437-4613  
 Owner/Contact Phone Number

(520) 792-0377  
 Owner/Contact Fax Number

SAMPLE COLLECTION POINT/ID:

- Zone/Distribution
- Other - Direct from source
  - Surface
  - Well

Contaminant                      Lead (Pb)                      Copper (Cu)  
 Action Level                      0.015 mg/l                      1.3 mg/l  
 Analysis Methods                      200.9                      200.7  
 Sample Type:                      \_\_\_\_\_                      \_\_\_\_\_

- Sample Type:
- Triennial (3YR) Compliance
  - Annual Compliance
  - 6 Month Initial Compliance

Specimen #	Collection Point	Sample Date	Analysis Completion Date	Lead (mg/L) (1030) Result	Analysis Completion Date	Copper (mg/L) (1022) Result
10F0575-01(8C)	1490 Loma Ln	06/16/2010	07/14/2010	0.0035	06/22/2010	0.12
10F0575-02(8C)	5658 Calle Matate	06/16/2010	07/14/2010	ND	06/22/2010	0.048
10F0575-03(8C)	5429 Calle Matate	06/16/2010	07/14/2010	ND	06/22/2010	0.076
10F0575-04(8C)	5267 Calle Coro	06/16/2010	07/14/2010	ND	06/22/2010	0.12
10F0575-05(8C)	1221 Ramsey Canyon	06/17/2010	07/14/2010	ND	06/22/2010	ND
10F0575-06(8C)	5517 Calle Mano	06/16/2010	07/16/2010	ND	07/03/2010	ND
10F0575-07(8C)	1269 Calle Coro	06/16/2010	07/16/2010	0.0031	07/03/2010	0.12
10F0575-08(8C)	1531 Calle Coro	06/16/2010	07/16/2010	0.0035	07/03/2010	0.15
10F0575-09(8C)	5574 Calle Encina	06/16/2010	07/16/2010	0.0027	07/03/2010	0.13
10F0575-10(8C)	5520 Calle Mano	06/16/2010	07/16/2010	0.0034	07/03/2010	0.22

Lab ID# AZ0066

90th % Calc: \_\_\_\_\_

I hereby certify that the information provided in this report is accurate and correct to the best of my knowledge.

Printed Name and Phone Number of Lab Contact: Terri L. Garcia, Technical Director Phone # (520) 882-5880

Signature: *Terri L. Garcia*

Mail completed form to: ADEQ Water Quality Compliance Data Unit (MC 5415B-1), 1110 W. Washington St. Phoenix, AZ 85007.  
 For questions call: (602) 771-4513 or within AZ 1-800-234-5677 Ext. 4513. Fax: (602) 771-4505

Copies of this form are available at <http://www.azdeq.gov/function/forms/appswater.html#sdw>, scroll down to laboratory reporting forms and click on DWAR 8: DW Lead & Copper Analysis Report.

Revised: 8/2008



# **EXHIBIT 6**

WATKINS, BOB PO BOX 85160  TUCSON AZ 85754	Owner Id #: 10118      MAP Billing for Calendar Year: 2010 Due Date: 12/11/2009
-----------------------------------------------------	---------------------------------------------------------------------------------------

ANNUAL SAMPLING FEE WORKSHEET **DUU**

ENTER

NOV - 9 2009

Base Fee (all MAP systems) .....	\$	250.00
Fee per Connection in 2010: 56 connections X \$ 2.57 .....	\$	143.92
<b>Total Sampling Fee</b> .....	<b>\$</b>	<b>393.92</b>
Plus Paid Interest Charges and/or Other Adjustments .....	\$	0.00
Plus Unpaid Interest Charges as of 10/27/2009 .....	\$	0.00
Minus Payments Received and/or Other Adjustments .....	\$	0.00
<b>Amount Due</b> .....	<b>\$</b>	<b>393.92</b>
Amount received by ADEQ (Make check payable to State of Arizona) .....	\$	

\* A \$12 fee will be charged for any check not honored by the bank. Do not write below this line

**Make your check or money order payable to State of Arizona**  
**THIS FORM MUST ACCOMPANY YOUR REMITTANCE.**

Mail to:      Arizona Department of Environmental Quality PO Box 18228 Phoenix, AZ 85005	<table style="width: 100%; border-collapse: collapse;"> <tr><td style="border-bottom: 1px solid black;">Check Number:</td></tr> <tr><td style="border-bottom: 1px solid black;">Received:</td></tr> <tr><td style="border-bottom: 1px solid black;">Postmarked:</td></tr> <tr><td style="border-bottom: 1px solid black;">Entered:</td></tr> </table>	Check Number:	Received:	Postmarked:	Entered:
Check Number:					
Received:					
Postmarked:					
Entered:					



**ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY  
MONITORING ASSISTANCE PROGRAM  
ANNUAL SAMPLING FEE INVOICE**

\* Pursuant to A.R.S. § 49-360 F, interest will be charged if full payment is not received by the specified due date. If you dispute the amount billed, please contact ADPQ as soon as possible. To reduce collection costs on an unpaid invoice, you may remit an amount that you believe is not in dispute. However, if no payment is due in full or partial, you may suffer an additional five percent penalty of up to twenty-five percent of the amount due for each month or fraction of a month the amount is past due.

If you have any questions about your invoice, contact W. Scott Steinbagen at (602) 771-4445 or toll-free within Arizona at (800) 234-5677, extension 771-4445.

Pursuant to A.R.S. § 49-360 F and A.A.C. R18-4-224 through R18-4-226, "The director shall establish fees for the monitoring assistance program to be collected from all public water systems..."

Owner Id #: 10118	Invoice Number 66307
To: WATKINS, BOB PO BOX 85160 TUCSON AZ 85754	Public Water System Id #: 02020
	Billing for Calendar Year: 2010
	Due Date: December 11, 2009
	Total Amount Due . . . . . \$ 393.92
	Amount Paid . . . . . \$

1 Keep the top portion for your records. 1

# **EXHIBIT 7**

Indiada Water - Monitoring Cycle/Costs per Test

Contaminant	Monitoring Cycle	# of tests per cycle	Cost per Test
Total Coliform	Monthly	1	\$ 25.00
TTHM	Yearly	3	110.00
HAA5	Yearly	3	155.00
Copper & Lead	Tri-Annually	5	33.00

# **EXHIBIT 8**

Turner Laboratories, Inc.

DATE: 10-Nov-08

# INVOICE

Remit To: Turner Laboratories, Inc.  
2445 North Coyote Drive, Suite 104  
Tucson, AZ 85745

Attn: Accounts Receivable  
TEL: (520) 882-5880 FAX (520) 882-9788

Invoice TO Indiada Water  
P.O. Box 85160  
Tucson, AZ 85160

Attn: Keith Dojaquez

Phone: (520) 623-5172

Work Order: 0811237  
PO Number:  
Order Name  
Date Received 11/5/2008

**Invoice Number: 811237**

Payment Due Date: 10-Dec-08  
Payment Terms: Net 30 Days

Item	Remarks	Matrix	Qty	Unit Price	Mult	List Price	Test Total
Total Coliform by Colilert Method		Drinking Wat	1	\$25.00	1	\$25.00	\$25.00

**Order TOTAL: \$25.00**

Discount: 0.00%  
Surcharge: 0.00%  
Misc Charges: \$0.00

Misc Comments

Subtotal: \$25.00  
Payment Received: \$0.00  
**INVOICE Total \$25.00**

All invoices are due and payable net 30 days from receipt.  
We accept MasterCard and Visa.  
We appreciate your business.

Turner Laboratories, Inc.

DATE: 15-Dec-08

# INVOICE

Remit To:	Turner Laboratories, Inc. 2445 North Coyote Drive, Suite 104 Tucson, AZ 85745
Attn:	Accounts Receivable TEL: (520) 882-5880 FAX (520) 882-9788

Invoice TO Indiada Water  
P.O. Box 85160  
Tucson, AZ 85160  
Attn: Keith Dojaquez

Phone: (520) 623-5172

Work Order: 0812433  
PO Number:  
Order Name  
Date Received 12/10/2008

<b>Invoice Number:</b>	<b>812433</b>
------------------------	---------------

Payment Due Date: 14-Jan-09  
Payment Terms: Net 30 Days

Item	Remarks	Matrix	Qty	Unit Price	Mult	List Price	Test Total
Total Coliform by Colilert Method		Drinking Wat	1	\$25.00	1	\$25.00	\$25.00

<b>Order TOTAL:</b>	<b>\$25.00</b>
Discount:	0.00%
Surcharge:	0.00%
Misc Charges:	\$0.00

Subtotal:	\$25.00
Payment Received:	\$0.00
<b>INVOICE Total</b>	<b>\$25.00</b>

**Misc Comments**

All invoices are due and payable net 30 days from receipt.  
We accept MasterCard and Visa.  
We appreciate your business.

Turner Laboratories, Inc.

DATE: 12-Jan-09

# INVOICE

Remit To: Turner Laboratories, Inc.  
2445 North Coyote Drive, Suite 104  
Tucson, AZ 85745

Attn: Accounts Receivable  
TEL: (520) 882-5880 FAX (520) 882-9788

Invoice TO Indiada Water  
P.O. Box 85160  
Tucson, AZ 85160  
Attn: Keith Dojaquez

Phone: (520) 623-5172

Work Order: 0901265

PO Number:

Order Name

Date Received 1/8/2009

**Invoice Number: 901265**

Payment Due Date: 11-Feb-09

Payment Terms: Net 30 Days

Item	Remarks	Matrix	Qty	Unit Price	Mult	List Price	Test Total
Total Coliform by Colilert Method		Drinking Wat	2	\$20.00	1	\$20.00	\$40.00

**Order TOTAL: \$40.00**

Discount: 0.00%

Surcharge: 0.00%

Misc Charges: \$0.00

### Misc Comments

Subtotal: \$40.00

Payment Received: \$0.00

**INVOICE Total \$40.00**

All invoices are due and payable net 30 days from receipt.  
We accept MasterCard and Visa.  
We appreciate your business.

Turner Laboratories, Inc.

DATE: 06-Feb-09

# INVOICE

Remit To: Turner Laboratories, Inc.  
2445 North Coyote Drive, Suite 104  
Tucson, AZ 85745  
  
Attn: Accounts Receivable  
TEL: (520) 882-5880 FAX (520) 882-9788

Invoice TO: Indiada Water  
P.O. Box 85160  
Tucson, AZ 85160  
Attn: Keith Dojaquez  
  
Phone: (520) 623-5172  
Work Order: 0901749  
PO Number:  
Order Name  
Date Received 1/29/2009

**Invoice Number: 901749**

Payment Due Date: 08-Mar-09  
Payment Terms: Net 30 Days

Item	Remarks	Matrix	Qty	Unit Price	Mult	List Price	Test Total
Total Coliform by Colilert Method		Drinking Wat	5	\$20.00	1	\$20.00	\$100.00

**Order TOTAL: \$100.00**  
Discount: 0.00%  
Surcharge: 0.00%  
Misc Charges: \$0.00

Misc Comments

Subtotal: \$100.00  
Payment Received: \$0.00  
**INVOICE Total \$100.00**

All invoices are due and payable net 30 days from receipt.  
We accept MasterCard and Visa.  
We appreciate your business.

Turner Laboratories, Inc.

DATE: 24-Feb-09

**INVOICE**

Remit To: Turner Laboratories, Inc.  
2445 North Coyote Drive, Suite 104  
Tucson, AZ 85745  
  
Attn: Accounts Receivable  
TEL: (520) 882-5880 FAX (520) 882-9788

Invoice TO Indiada Water  
P.O. Box 85160  
Tucson, AZ 85160  
Attn: Keith Dojaquez  
  
Phone: (520) 623-5172  
Work Order: 0902617  
PO Number:  
Order Name  
Date Received 2/19/2009

**Invoice Number: 902617**

Payment Due Date: 26-Mar-09  
Payment Terms: Net 30 Days

Item	Remarks	Matrix	Qty	Unit Price	Mult	List Price	Test Total
Total Coliform by Colilert Method		Drinking Wat	5	\$20.00	1	\$20.00	\$100.00

**Order TOTAL: \$100.00**  
Discount: 0.00%  
Surcharge: 0.00%  
Misc Charges: \$0.00

Misc Comments

Subtotal: \$100.00  
Payment Received: \$0.00  
**INVOICE Total \$100.00**

All invoices are due and payable net 30 days from receipt.  
We accept MasterCard and Visa.  
We appreciate your business.

Turner Laboratories, Inc.

Invoice Date: 03/18/2009

**INVOICE**

Remit to: Turner Laboratories, Inc.  
2445 North Coyote Drive, Suite 104  
Tucson, AZ 85745

Attn: Accounts Receivable  
TEL: (520) 882-5880 FAX: (520) 882-9788

Invoice To: Indiada Water  
PO Box 85160  
Tucson, AZ 85754  
Attn: Keith Dojaquez

**Invoice Number: 09C0334**

Phone: (520) 437-4613  
Work Order: 09C0334  
PO Number:  
Received: 03/09/2009

Payment Due Date: 04/17/2009

Payment Terms: Net 30 Days

Analysis/Description	Matrix	Quantity	Unit Cost	Extended Cost
Coliform by Colilert [10 day]	Drinking Water	1	\$25.00	\$25.00

**Invoice Total: \$25.00**

All invoices are due and payable net 30 days from receipt.  
We accept MasterCard and Visa.  
We appreciate your business.

Turner Laboratories, Inc.

Invoice Date: 04/09/2009

Remit to: Turner Laboratories, Inc.  
2445 North Coyote Drive, Suite 104  
Tucson, AZ 85745

**INVOICE**

Attn: Accounts Receivable  
TEL: (520) 882-5880 FAX: (520) 882-9788

Invoice To: Indiada Water  
Attn: Keith Dojaquez  
PO Box 85160  
Tucson, AZ 85754

**Invoice Number: 09D0242**

Payment Due Date: 05/11/2009

Phone: (520) 437-4613  
Work Order: 09D0242  
PO Number:  
Received: 04/06/2009

Payment Terms: Net 30 Days

Analysis/Description	Matrix	Quantity	Unit Cost	Extended Cost
Coliform by Colilert [10 day]	Drinking Water	1	\$25.00	\$25.00

**Invoice Total: \$25.00**

All invoices are due and payable net 30 days from receipt.  
We accept MasterCard and Visa.  
We appreciate your business.

Turner Laboratories, Inc.

Invoice Date: 05/13/2009

Remit to: Turner Laboratories, Inc.  
2445 North Coyote Drive, Suite 104  
Tucson, AZ 85745

**INVOICE**

Attn: Accounts Receivable  
TEL: (520) 882-5880 FAX: (520) 882-9788

Invoice To: Indiada Water  
Attn: Keith Dojaquez  
PO Box 85160  
Tucson, AZ 85754

Project Name: Drinking Water

**Invoice Number: 09E0184**

Phone: (520) 437-4613  
Work Order: 09E0184  
PO Number:  
Received: 05/05/2009

Payment Due Date: 06/12/2009

Payment Terms: Net 30 Days

Analysis/Description	Matrix	Quantity	Unit Cost	Extended Cost
Coliform by Colilert [10 day]	Drinking Water	1	\$25.00	\$25.00

**Invoice Total: \$25.00**

All invoices are due and payable net 30 days from receipt.  
We accept MasterCard and Visa.  
We appreciate your business.

Turner Laboratories, Inc.

Invoice Date: 06/09/2009

Remit to: Turner Laboratories, Inc.  
2445 North Coyote Drive, Suite 104  
Tucson, AZ 85745

**INVOICE**

Attn: Accounts Receivable  
TEL: (520) 882-5880 FAX: (520) 882-9788

Invoice To: Indiada Water  
Attn: Keith Dojaquez  
PO Box 85160  
Tucson, AZ 85754

Project Name: Drinking Water

**Invoice Number: 09F0192**

Payment Due Date: 07/09/2009

Phone: (520) 437-4613  
Work Order: 09F0192  
PO Number:  
Received: 06/02/2009

Payment Terms: Net 30 Days

Analysis/Description	Matrix	Quantity	Unit Cost	Extended Cost
Coliform by Colilert [10 day]	Drinking Water	1	\$25.00	\$25.00

**Invoice Total: \$25.00**

All invoices are due and payable net 30 days from receipt.  
We accept MasterCard and Visa.  
We appreciate your business.

Turner Laboratories, Inc.

Invoice Date: 07/16/2009

Remit to: Turner Laboratories, Inc.  
2445 North Coyote Drive, Suite 104  
Tucson, AZ 85745

**INVOICE**

Attn: Accounts Receivable  
TEL: (520) 882-5880 FAX: (520) 882-9788

Invoice To: Indiada Water  
Attn: Keith Dojaquez  
PO Box 85160  
Tucson, AZ 85754

Project Name: Drinking Water

**Invoice Number: 09G0314**

Payment Due Date: 08/17/2009

Phone: (520) 437-4613  
Work Order: 09G0314  
PO Number:  
Received: 07/07/2009

Payment Terms: Net 30 Days

Analysis/Description	Matrix	Quantity	Unit Cost	Extended Cost
Coliform by Colilert [10 day]	Drinking Water	1	\$25.00	\$25.00

**Invoice Total: \$25.00**

All invoices are due and payable net 30 days from receipt.  
We accept MasterCard and Visa.  
We appreciate your business.

Turner Laboratories, Inc.

Invoice Date: 07/31/2009

Remit to: Turner Laboratories, Inc.  
2445 North Coyote Drive, Suite 104  
Tucson, AZ 85745

**INVOICE**

Attn: Accounts Receivable  
TEL: (520) 882-5880 FAX: (520) 882-9788

Invoice To: Indiada Water  
Attn: Elaine Byfield  
PO Box 85160  
Tucson, AZ 85754

Project Name: Drinking Water

Invoice Number: 09G0481

Payment Due Date: 09/01/2009

Phone: (520) 623-5172  
Work Order: 09G0481  
PO Number:  
Received: 07/14/2009

Payment Terms: Net 30 Days

Analysis/Description	Matrix	Quantity	Unit Cost	Extended Cost
TTHM by E524.2 [10 day]	Drinking Water	3	\$150.00	\$450.00
Haloacetic Acids by 552.2 [10 day]	Drinking Water	3	\$155.00	\$465.00

**Invoice Total: \$915.00**

All invoices are due and payable net 30 days from receipt.  
We accept MasterCard and Visa.  
We appreciate your business.

Turner Laboratories, Inc.

Invoice Date: 08/12/2009

Remit to: Turner Laboratories, Inc.  
2445 North Coyote Drive, Suite 104  
Tucson, AZ 85745

**INVOICE**

Attn: Accounts Receivable  
TEL: (520) 882-5880 FAX: (520) 882-9788

Invoice To: Indiada Water  
Attn: Elaine Byfield  
PO Box 85160  
Tucson, AZ 85754

Project Name: Drinking Water 20-020

**Invoice Number: 09H0275**

Payment Due Date: 09/11/2009

Phone: (520) 623-5172  
Work Order: 09H0275  
PO Number:  
Received: 08/05/2009

Payment Terms: Net 30 Days

Analysis/Description	Matrix	Quantity	Unit Cost	Extended Cost
Coliform by Colilert [10 day]	Drinking Water	1	\$25.00	\$25.00

**Invoice Total: \$25.00**

All invoices are due and payable net 30 days from receipt.  
We accept MasterCard and Visa.  
We appreciate your business.

Turner Laboratories, Inc.

Invoice Date: 08/27/2009

Remit to: Turner Laboratories, Inc.  
2445 North Coyote Drive, Suite 104  
Tucson, AZ 85745

**INVOICE**

Attn: Accounts Receivable  
TEL: (520) 882-5880 FAX: (520) 882-9788

Invoice To: Indiada Water  
Attn: Elaine Byfield  
PO Box 85160  
Tucson, AZ 85754

Project Name: Drinking Water 20-020

Invoice Number: 09H0626

Payment Due Date: 09/28/2009

Phone: (520) 623-5172  
Work Order: 09H0626  
PO Number:  
Received: 08/18/2009

Payment Terms: Net 30 Days

Analysis/Description	Matrix	Quantity	Unit Cost	Extended Cost
Cu/Pb Testing [10 day]	Drinking Water	1	\$33.00	\$33.00

**Invoice Total: \$33.00**

All invoices are due and payable net 30 days from receipt.  
We accept MasterCard and Visa.  
We appreciate your business.

Turner Laboratories, Inc.

Invoice Date: 09/11/2009

Remit to: Turner Laboratories, Inc.  
2445 North Coyote Drive, Suite 104  
Tucson, AZ 85745

# INVOICE

Attn: Accounts Receivable  
TEL: (520) 882-5880 FAX: (520) 882-9788

Invoice To: Indiada Water  
Attn: Elaine Byfield  
PO Box 85160  
Tucson, AZ 85754

Project Name: Drinking Water 20-020

**Invoice Number: 09H0566**

Payment Due Date: 10/12/2009

Phone: (520) 623-5172  
Work Order: 09H0566  
PO Number:  
Received: 08/14/2009

Payment Terms: Net 30 Days

Analysis/Description	Matrix	Quantity	Unit Cost	Extended Cost
Cu/Pb Testing [10 day]	Drinking Water	9	\$33.00	\$297.00

**Invoice Total: \$297.00**

All invoices are due and payable net 30 days from receipt.  
We accept MasterCard and Visa.  
We appreciate your business.

Turner Laboratories, Inc.

Invoice Date: 11/11/2009

Remit to: Turner Laboratories, Inc.  
2445 North Coyote Drive, Suite 104  
Tucson, AZ 85745

**INVOICE**

Attn: Accounts Receivable  
TEL: (520) 882-5880 FAX: (520) 882-9788

Invoice To: Indiada Water  
Attn: Accounts Payable  
PO Box 85160  
Tucson, AZ 85754

Project Name: Drinking Water 20-020

**Invoice Number: 09K0267**

Payment Due Date: 12/11/2009

Phone: (520) 437-4613  
Work Order: 09K0267  
PO Number:  
Received: 11/04/2009

Payment Terms: Net 30 Days

Analysis/Description	Matrix	Quantity	Unit Cost	Extended Cost
Coliform by Colilert [10 day]	Drinking Water	1	\$25.00	\$25.00

**Invoice Total: \$25.00**

All invoices are due and payable net 30 days from receipt.  
We accept MasterCard and Visa.  
We appreciate your business.

Turner Laboratories, Inc.

Invoice Date: 12/08/2009

Remit to: Turner Laboratories, Inc.  
2445 North Coyote Drive, Suite 104  
Tucson, AZ 85745

**INVOICE**

Attn: Accounts Receivable  
TEL: (520) 882-5880 FAX: (520) 882-9788

Invoice To: Indiada Water  
Attn: Accounts Payable  
PO Box 85160  
Tucson, AZ 85754

Project Name: Drinking Water 20-020

**Invoice Number: 09L0176**

Payment Due Date: 01/07/2010

Phone: (520) 437-4613  
Work Order: 09L0176  
PO Number:  
Received: 12/02/2009

Payment Terms: Net 30 Days

Analysis/Description	Matrix	Quantity	Unit Cost	Extended Cost
Coliform by Colilert [10 day]	Drinking Water	1	\$25.00	\$25.00

**Invoice Total: \$25.00**

All invoices are due and payable net 30 days from receipt.  
We accept MasterCard and Visa.  
We appreciate your business.



**ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY  
MONITORING ASSISTANCE PROGRAM  
ANNUAL SAMPLING FEE INVOICE**

\* Pursuant to A.R.S. § 49-114, metered will be charged if full payment is not received by the specified due date. If you dispute the amount billed, please contact ADEQ as soon as possible. To reduce metered costs, on an unpaid invoice, you may remit an amount that you believe is due to date. However, if no payment is due to without neglect, you may suffer an additional three percent penalty up to twenty-five percent of the amount due for each month or fraction of a month the amount is past due.

If you have any questions about your invoice, contact W. Scott Steinhagen at (602) 771-4445 or toll-free within Arizona at (800) 234-5677, extension 771-4445.

Pursuant to A.R.S. § 49-360 F and A.A.C. R18-4-224 through R18-4-226, "The director shall establish fees for the monitoring assistance program to be collected from all public water systems..."

Owner Id #: 10118	Invoice Number 66307
To: WATKINS, BOB PO BOX 85180 TUCSON AZ 85754	Public Water System ID #: 02020
	Billing for Calendar Year: 2010
	Due Date: December 11, 2009
	Total Amount Due . . . . . \$ 393.92
	Amount Paid . . . . . \$

† Keep the top portion for your records. †

Annual Sampling Fee Invoice

ADEQ Federal Tax #866004791  
Invoice # 66307

WATKINS, BOB PO BOX 85160  TUCSON AZ 85754	Owner Id #: 10118	MAP
	Billing for Calendar Year: 2010	
	Due Date: 12/11/2009	

ANNUAL SAMPLING FEE WORKSHEET *DDU*

ENTERED  
NOV - 9 2009

Base Fee (all MAP systems)		\$	250.00
Fee per Connection in 2010	56 connections X \$ 2.57	\$	143.92
Total Sampling Fee		\$	393.92
Plus Paid Interest Charges and/or Other Adjustments		\$	0.00
Plus Unpaid Interest Charges as of 10/27/2009		\$	0.00
Minus Payments Received and/or Other Adjustments		\$	0.00
Amount Due		\$	393.92
Amount received by ADEQ (Make check payable to State of Arizona)		\$	

\* A \$12 fee will be charged for any check not honored by the bank.

Do not write below this line

Make your check or money order payable to State of Arizona  
**THIS FORM MUST ACCOMPANY YOUR REMITTANCE.**  
  
Mail to: Arizona Department of Environmental Quality  
PO Box 18228  
Phoenix, AZ 85005

Check Number:	
Received:	
Postmarked:	
Entered:	CS 10/27/09 WMS/063