



0000150679

1 Kathleen M. Reidhead
2 14406 S. Cholla Canyon Dr.
3 Phoenix, AZ 85044
4 Telephone: 480-704-0261
5
6

RECEIVED

2014 JAN - 7 A 11: 02

ORIGINAL

BEFORE THE ARIZONA CORPORATION COMMISSION

DOCKET NO: W-03514A-13-0111

Arizona Corporation Commission

DOCKETED

JAN 07 2014

DOCKETED BY 

DOCKET NO: W-03514A-13-0142

SUPPLEMENT TO PRE-FILED TESTIMONY
PHASE 2

7
8 IN THE MATTER OF THE APPLICATION
9 OF PAYSON WATER CO., INC., AN
10 ARIZONA CORPORATION, FOR A
11 DETERMINATION OF THE FAIR VALUE
12 OF ITS UTILITY PLANTS AND
13 PROPERTY AND FOR INCREASES IN ITS
14 WATER RATES AND CHARGES FOR
15 UTILITY SERVICE BASED THEREON.
16
17 IN THE MATTER OF THE APPLICATION
18 OF PAYSON WATER CO., INC., AN
19 ARIZONA CORPORATION, FOR
20 AUTHORITY TO: (1) ISSUE EVIDENCE
21 OF INDEBTEDNESS IN AN AMOUNT
22 NOT TO EXCEED \$1,238,000 IN
23 CONNECTION WITH INFRASTRUCTURE
24 IMPROVEMENTS TO THE UTILITY
25 SYSTEM; AND (2) ENCUMBER REAL
26 PROPERTY AND PLANT AS SECURITY
27 FOR SUCH INDEBTEDNESS.
28
29

30 Kathleen M. Reidhead, "KMR", is an Intervener in the above-captioned matter. KMR submits
31 the attached Exhibit KMR-G as additional evidence related to groundwater supplies in Mesa del Caballo,
32 "MdC".
33

34 KMR refers to the Well Registry Export Report that was previously submitted as an attachment
35 to her letter dated October 7, 2013, posted to the docket of this case as Document #148764. She
36 reviewed the Imaged Record for each well listed on that export taken from the Arizona Department of
37 Water Resources, "ADWR", website, available at this link: <https://gisweb.azwater.gov/WellRegistry/SearchWellReg.aspx> and obtained as many Well Driller Reports and/or Completion Reports available for
38 the 60 wells shown on that export. A number of the wells were found to have been abandoned, never
39 drilled, or located elsewhere (not within MdC). A number of the others did not have a completion
40 report submitted or other paperwork that showed the depth of water level. However, 32 wells did have
41 data available and are attached as Exhibit KMR-G showing depth of water levels in MdC from 1991 to
42 2013. You can see from the summary that water levels in MdC have remained fairly consistent over this
43

1 22 year period of time, ranging from 80 feet to 276 feet below ground. Since 2011, 9 new wells have
2 been drilled and all of these recent wells show water available at depths between 120 to 276 feet below
3 ground. This evidence shows that the aquifer in MdC is productive, which refutes the claims made by
4 Payson Water Company, "PWC", that it is "too risky" to drill new wells or to deepen their existing wells.

5
6 KMR also attaches as Exhibit KMR-H a letter written by Robert Hardcastle in April 2008 to the
7 Town of Payson expressing an interest in participating in supplies of water from the Cragin reservoir.
8 This letter was written a full 13 months prior to the summer 2009 season when the first water
9 deficiencies were claimed by PWC in MdC. It is unclear why Robert Hardcastle would be interested in
10 obtaining supplies of water for a problem that had not yet presented itself.

11
12 The volume of evidence presented by KMR clearly shows that there is no need for a tie-in to the
13 Cragin pipeline at a cost estimated at nearly \$1.2 Million. It is not even proven that there are water
14 deficiencies in MdC, only claims of such. The evidence presented during this rate case certainly tells a
15 different story. 32 private well owners in MdC appear to have acquired ample supplies of water. Only
16 PWC claims to have inadequate or underperforming wells. That is a claim that warrants further
17 investigation, but should not be accepted without proof, in light of the other inaccurate and/or
18 misleading claims that PWC has presented throughout the course of this case.

19
20 Respectfully submitted this 7th day of January, 2014.

21
22 By Kathleen M. Reidhead
23 Kathleen M. Reidhead, Intervener
24 14406 S. Cholla Canyon Dr.
25 Phoenix, AZ 85044
26

27 **ORIGINAL** and thirteen (13) copies
28 of the foregoing were filed this 7th
29 day of January, 2014 with:

30
31 Docket Control
32 Arizona Corporation Commission
33 1200 W. Washington Street
34 Phoenix, AZ 85007
35

36 **COPY** of the foregoing was mailed
37 this 7th day of January, 2014 to:

38
39 Jay Shapiro (Attorney for Payson Water Co., Inc.)
40 Fennemore Craig P.C.
41 2394 E. Camelback Road, Suite 600
42 Phoenix, AZ 85016
43

1 Robert Hardcastle
2 3101 State Road
3 Bakersfield, CA 93308
4
5 William Sheppard
6 6250 North Central Avenue
7 Phoenix, AZ 85012
8
9 Thomas Bremer
10 6717 E. Turquoise Ave.
11 Scottsdale, AZ 85253
12
13 J. Stephen Gehring & Richard M. Burt
14 8157 W. Deadeye Rd.
15 Payson, AZ 85541
16
17 Glynn Ross
18 405 S. Ponderosa
19 Payson, AZ 85541
20
21 Suzanne Nee
22 2051 E. Aspen Dr.
23 Tempe, AZ 85282

24
25 Kathleen M. Reidhead
26

EXHIBIT KMR-G

Summary of Mesa del Caballo Wells
1991-2013 Depth to Water Levels

<u>Well #</u>	<u>Year Drilled</u>	<u>Address</u>	<u>Depth of Well</u>	<u>Depth to Water</u>
55-222540	2013	7555 N. Caballero	400	226
55-222533	2013	7511 N. Caballero Rd.	400	231
55-221744	2013	8211 W. Barranca Rd.	400	213
55-221514	2013	7426 N. Toya Vista Rd.	400	236
55-220767	2012	8058 W. Hallway Dr.	400	234
55-220768	2012	8071 W. Sepia Rd.	400	276
55-221636	2012	8129 W. Sepia Rd.	400	252
55-220514	2011	7581 N. Toya Vista	400	230
55-913123	2011	8022 W. Stallion Rd.	405	120
55-592209	2002	HC8 Box 700-S	205	80
55-592680	2002	Hallway 6F	360	189
55-585747	2001	?? Brooke Utilities ??	400	155
55-560398	1997	605 W. Arabian Way	440	198
55-558959	1997	HCR Box 588A	300	265
55-556430	1997	HC3 Box 519-M	300	185
55-553798	1996	HC3 Box 593-I	360	177
55-553768	1996	HC3 Box 519H	320	171
55-550693	1996	1620 N. McLane	320	168
55-544697	1995	HCR Box 588	420	225
55-548768	1995	HCR Box 562-E	380	174
55-549961	1995	HC 3 Box 518-K	280	184
55-550467	1995	HC 3 Box 518-C	340	185
55-545800	1995	P.O. Box 58	340	177
55-550467	1995	P.O. Box 2357	340	185
55-540604	1994	HCR 579-A	240	180
55-542028	1994	?? Phoenix Address listed ??	300	220
55-540136	1993	8166 W. Sepia Rd.	260	185
55-539625	1993	HCR 573-G	300	155
55-539488	1993	HC 3 Box 573	240	165
55-539490	1993	HC 3 Box 573-E	260	167
55-539229	1993	P.O. Box 564	220	166
55-531101	1991	P.O. Box 2880	400	177



ARIZONA DEPARTMENT OF WATER RESOURCES
 Information Management Unit
 P.O. Box 36020, Phoenix, Arizona 85067-3589
 (602) 771-8527 * (800) 352-8488
 www.water.az.gov

**Well Driller Report
 and
 Well Log**

11/19/13
 Bw
 Pg. 1/2

This report should be prepared by the driller in detail and filed with the Department within 30 days following completion of the well.

RECEIVED
 SEP 30 2013
 ARIZONA DEPARTMENT
 OF WATER RESOURCES

FILE NUMBER
A(11-10) 23 ADB
 WELL REGISTRATION NUMBER
55- 222540
 PERMIT NUMBER (IF ISSUED)

** PLEASE PRINT CLEARLY **

Mail To:	SECTION 1. DRILLING AUTHORIZATION	
	Drilling Firm	
	NAME AERO DRILLING AND PUMPS, INC.	DWR LICENSE NUMBER 108
	ADDRESS P.O. BOX 499	TELEPHONE NUMBER 928-474-2376
	CITY/STATE/ZIP PAYSON, AZ 85547-0499	FAX

SECTION 2. REGISTRY INFORMATION	
Well Owner	Location of Well
FULL NAME OF COMPANY, ORGANIZATION OR INDIVIDUAL DIANA L. HALSEY	WELL LOCATION ADDRESS (IF ANY) 7555 N. Caballero
MAILING ADDRESS 7555 N. CABALLERO	TOWNSHIP (N/S) RANGE (E/W) SECTION 160 ACRE 40 ACRE 10 ACRE 11N 10E 23 NE 1/4 SE 1/4 NW 1/4
CITY / STATE / ZIP PAYSON, AZ 85541	LATITUDE LONGITUDE 34° 17' 6.2" N 111° 17' 36.6" W Degrees Minutes Seconds Degrees Minutes Seconds
CONTACT PERSON NAME AND TITLE	METHOD OF LATITUDE / LONGITUDE (CHECK ONE) <input checked="" type="checkbox"/> *GPS: Hand-Held <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade
TELEPHONE NUMBER 928-474-5815	FAX
LAND SURFACE ELEVATION AT WELL 5182	Feet Above Sea Level
WELL NAME (e.g., MW-1, PZ-3, Lot 25 Well, Smith Well, etc.)	METHOD OF ELEVATION (CHECK ONE) <input checked="" type="checkbox"/> *GPS: Hand-Held <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade
*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (CHECK ONE) <input checked="" type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):	
COUNTY Gila	ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL 302 34 011B

SECTION 3. WELL CONSTRUCTION DETAILS		
Drill Method	Method of Well Development	Method of Sealing at Reduction Points
CHECK ONE <input checked="" type="checkbox"/> Air Rotary <input type="checkbox"/> Bored or Augered <input type="checkbox"/> Cable Tool <input type="checkbox"/> Dual Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Reverse Circulation <input type="checkbox"/> Driven <input type="checkbox"/> Jetted <input type="checkbox"/> Air Percussion / Odex Tubing <input type="checkbox"/> Other (please specify)	CHECK ONE <input checked="" type="checkbox"/> Airlift <input type="checkbox"/> Bail <input type="checkbox"/> Surge Back <input type="checkbox"/> Surge Pump <input type="checkbox"/> Other (please specify)	CHECK ONE <input checked="" type="checkbox"/> None <input type="checkbox"/> Packed <input type="checkbox"/> Swedged <input type="checkbox"/> Welded <input type="checkbox"/> Other (please specify)
	Condition of Well	Construction Dates
	CHECK ONE <input type="checkbox"/> Capped <input checked="" type="checkbox"/> Pump Installed	DATE WELL CONSTRUCTION STARTED 9/4/13 DATE WELL CONSTRUCTION COMPLETED 9/6/13

I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the best of my knowledge and belief.

DRILLING FIRM Aero Drilling & Pumps, Inc.	SIGNATURE OF QUALIFYING PARTY 	DATE 9/6/13
---	-----------------------------------	-----------------------

Well Driller Report and Well Log

WELL REGISTRATION NUMBER
55-222540

SECTION 4. WELL CONSTRUCTION DESIGN (AS BUILT) (attach additional page if needed) Pg. 2/2

DEPTH OF BORING 400 Feet Below Land Surface	DEPTH OF COMPLETED WELL 400 Feet Below Land Surface
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Water Level Information			
STATIC WATER LEVEL 226 Feet Below Land Surface	DATE MEASURED 9/6/13	TIME MEASURED	IF FLOWING WELL, METHOD OF FLOW REGULATION <input type="checkbox"/> Valve <input type="checkbox"/> Other:

Borehole			Installed Casing													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE (X)			PERFORATION TYPE (X)					SLOT SIZE IF ANY (inches)		
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE		SLOTTED	IF OTHER TYPE, DESCRIBE
0	20	10	0	20	6	X				X						
20	400	6	0	360	4.5		X			X						
			360	400	4.5		X							Drilled	1/4 X 16	

Installed Annular Material												
DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (X)							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE		IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE	
						GROUT	CHIPS PELLETS					
0	20			X								



ARIZONA DEPARTMENT OF WATER RESOURCES
 Information Management Unit
 P.O. Box 36020, Phoenix, Arizona 85067-3589
 (602) 771-8527 • (800) 352-8488
 www.water.az.gov

**Well Driller Report
 and
 Well Log**

11/12/13

Bh

Pg. 1/2

This report should be prepared by the driller in detail and filed with the Department within 30 days following completion of the well.

RECEIVED
 SEP 11 2013

FILE NUMBER
A(11-10) 23 ADB
 WELL REGISTRATION NUMBER
55-222533
 PERMIT NUMBER (IF ISSUED)

**** PLEASE PRINT CLEARLY ****

Mail To:	SECTION 1. DRILLING AUTHORIZATION		ARIZONA DEPARTMENT OF WATER RESOURCES	
	Drilling Firm		DWR LICENSE NUMBER	
	NAME AERO DRILLING AND PUMPS, INC.		108	
	ADDRESS P.O. BOX 499		TELEPHONE NUMBER 928-474-2376	
CITY/STATE/ZIP PAYSON, AZ 85547-0499		FAX		

SECTION 2. REGISTRY INFORMATION						
Well Owner				Location of Well		
FULL NAME OF COMPANY, ORGANIZATION OR INDIVIDUAL DAN & BARB PRUETT				WELL LOCATION ADDRESS (IF ANY) 7511 N. Caballero, Mesa Del Caballo		
MAILING ADDRESS 7511 N. CABALLERO RD.				TOWNSHIP (N/S)	RANGE (E/W)	SECTION
CITY / STATE / ZIP PAYSON, AZ 85541				11N	10E	23
CONTACT PERSON NAME AND TITLE				LATITUDE	LONGITUDE	
TELEPHONE NUMBER 928-978-5424				34 °	17	4.4 "N
FAX				Minutes	Seconds	Degrees
WELL NAME (e.g., MW-1, PZ-3, Lot 25 Well, Smith Well, etc.)				METHOD OF ELEVATION (CHECK ONE)		
				<input checked="" type="checkbox"/> *GPS: Hand-Held <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade		
				LAND SURFACE ELEVATION AT WELL 5180 Feet Above Sea Level		
				METHOD OF LATITUDE / LONGITUDE (CHECK ONE) <input checked="" type="checkbox"/> *GPS: Hand-Held <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade		
				*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (CHECK ONE) <input checked="" type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):		
				COUNTY	ASSESSOR'S PARCEL ID NUMBER	PARCEL
				Gila	BOOK 302	MAP 34
				PARCEL 004P		

SECTION 3. WELL CONSTRUCTION DETAILS		
Drill Method	Method of Well Development	Method of Sealing at Reduction Points
CHECK ONE <input checked="" type="checkbox"/> Air Rotary <input type="checkbox"/> Bored or Augered <input type="checkbox"/> Cable Tool <input type="checkbox"/> Dual Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Reverse Circulation <input type="checkbox"/> Driven <input type="checkbox"/> Jetted <input type="checkbox"/> Air Percussion / Odex Tubing <input type="checkbox"/> Other (please specify)	CHECK ONE <input checked="" type="checkbox"/> Airlift <input type="checkbox"/> Bail <input type="checkbox"/> Surge Back <input type="checkbox"/> Surge Pump <input type="checkbox"/> Other (please specify)	CHECK ONE <input checked="" type="checkbox"/> None <input type="checkbox"/> Packed <input type="checkbox"/> Swedged <input type="checkbox"/> Welded <input type="checkbox"/> Other (please specify)
	Condition of Well	Construction Dates
	CHECK ONE <input checked="" type="checkbox"/> Capped <input type="checkbox"/> Pump Installed	DATE WELL CONSTRUCTION STARTED 8/20/13
		DATE WELL CONSTRUCTION COMPLETED 8/20/13

I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the best of my knowledge and belief.		
DRILLING FIRM Aero Drilling & Pumps, Inc.	SIGNATURE OF QUALIFYING PARTY <i>[Signature]</i>	DATE 8/20/13

Well Driller Report and Well Log

WELL REGISTRATION NUMBER
55-222533

SECTION 4. WELL CONSTRUCTION DESIGN (AS BUILT) (attach additional page if needed)

DEPTH OF BORING 400 Feet Below Land Surface	DEPTH OF COMPLETED WELL 400 Feet Below Land Surface
---	---

Water Level Information			
STATIC WATER LEVEL 231 Feet Below Land Surface	DATE MEASURED 8/20/13	TIME MEASURED	IF FLOWING WELL, METHOD OF FLOW REGULATION <input type="checkbox"/> Valve <input type="checkbox"/> Other:

Borehole			Installed Casing													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE (X)				PERFORATION TYPE (X)				SLOT SIZE IF ANY (inches)		
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE		SLOTTED	IF OTHER TYPE, DESCRIBE
0	20	10	0	20	6	X					X					
20	400	6	0	360	4.5		X				X					
			360	400	4.5		X							Drilled	1/4 X 16	

Installed Annular Material												
DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (X)							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	20			X								



Arizona Department of Water Resources
Water Management Division
P.O. Box 36020, Phoenix, AZ 85067-6020
(602) 771-8627 • (602) 771-8690 fax

Pump Installation Completion Report

- Review instructions prior to completing form in black or blue ink.
- The registered well owner should file this report with the Department within 30 days following installation of pump equipment.

FILE NUMBER
A(11-10)23 DBB
WELL REGISTRATION NUMBER
55 - 221514

** PLEASE PRINT CLEARLY **

SECTION 1. REGISTRY INFORMATION

Well Owner		Location of Well					
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Frank Kemp		WELL LOCATION ADDRESS (IF ANY) 7426 N. Toya Vista Rd.					
MAILING ADDRESS 426 N. Toya Vista Rd.		TOWNSHIP (N/S) 11N	RANGE (E/W) 10E	SECTION 23	160 ACRE SE ¼	40 ACRE NW ¼	10 ACRE NW ¼
CITY / STATE / ZIP CODE Payson, AZ 85541		COUNTY ASSESSOR'S PARCEL ID NUMBER (MOST RECENT)					
CONTACT PERSON NAME AND TITLE Frank Kemp/ Owner		BOOK 302	MAP 34	PARCEL 383			
TELEPHONE NUMBER 928-587-5266	FAX	COUNTY WHERE WELL IS LOCATED Gila					

SECTION 2. EQUIPMENT INSTALLED

DATE PUMP INSTALLED 3/18/13	Pitless Adaptor CHECK ONE (SEE INSTRUCTIONS FOR DEFINITION)
Pump Type CHECK ONE	Was a pitless adaptor installed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Air Lift <input type="checkbox"/> Bucket <input type="checkbox"/> Centrifugal <input type="checkbox"/> Jet <input type="checkbox"/> Piston	IF YES, DEPTH BELOW GROUND LEVEL THE DEVICE WAS INSTALLED Feet
<input type="checkbox"/> Rotary <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Other (please specify):	Power Type CHECK ONE
RATED PUMP CAPACITY 5 Gallons Per Minute	<input type="checkbox"/> Diesel Engine <input checked="" type="checkbox"/> Electric Motor <input type="checkbox"/> Gasoline Engine <input type="checkbox"/> Hand <input type="checkbox"/> Natural Gas <input type="checkbox"/> Windmill <input type="checkbox"/> Other (please specify):
	HORSE POWER RATING OF MOTOR 3/4

SECTION 3. PUMP TEST

Pump Test Data	Method of Discharge Measurement	Method of Measuring Water Level
DATE WELL TESTED 3/18/13	CHECK ONE	CHECK ONE
STATIC WATER LEVEL (A) 236 Feet Below Land Surface	<input type="checkbox"/> Bailer <input checked="" type="checkbox"/> Bucket - Barrel - Stopwatch <input type="checkbox"/> Current <input type="checkbox"/> Estimated - Air Lift <input type="checkbox"/> Gauge <input type="checkbox"/> Meter <input type="checkbox"/> Orifice <input type="checkbox"/> Volume <input type="checkbox"/> Weir - Flume <input type="checkbox"/> Other (please specify):	<input type="checkbox"/> Air Line <input checked="" type="checkbox"/> Electric Measuring Line (Sounder) <input type="checkbox"/> Steel Tape <input type="checkbox"/> Other (please specify):
PUMPING WATER LEVEL (B) 373 Feet Below Land Surface		
DRAWDOWN [(B) - (A)] 137 Feet Below Land Surface		
TEST PUMPING RATE 5 Gallons Per Minute		
DURATION OF PUMP TEST (Minimum 4 Hours) 4 Hours		
TOTAL PUMPING LIFT 373 Feet		
FOR FLOWING WELL, MEASURED SHUT IN HEAD <input type="checkbox"/> FT <input type="checkbox"/> PSI		

I HEREBY CERTIFY that the above statements are true to the best of my knowledge and belief according to A.R.S. § 45-600(B).

SIGNATURE OF WELL OWNER
Frank Kemp

DATE
5/28/13

Well Driller Report and Well Log

Pg. 2/2

WELL REGISTRATION NUMBER
55-221514

SECTION 4. WELL CONSTRUCTION DESIGN (AS BUILT) (attach additional page if needed)

DEPTH OF BORING 380 Feet Below Land Surface	DEPTH OF COMPLETED WELL 380 Feet Below Land Surface
---	---

Water Level Information			
STATIC WATER LEVEL 236 Feet Below Land Surface	DATE MEASURED 3/18/13	TIME MEASURED	IF FLOWING WELL, METHOD OF FLOW REGULATION <input type="checkbox"/> Valve <input type="checkbox"/> Other:

Borehole			Installed Casing													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE (X)				PERFORATION TYPE (X)					SLOT SIZE IF ANY (inches)	
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED		IF OTHER TYPE, DESCRIBE
0	20	10	0	20	6	X				X						
0	380	16	0	340	4.5		X			X						
			340	400	4.5		X								Drilled	1/4 X 16

Installed Annular Material												
DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (X)						FILTER PACK				
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	20			X								

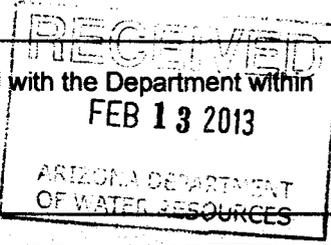
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ARIZONA DEPARTMENT OF WATER RESOURCES
 Information Management Unit
 P.O. Box 36020, Phoenix, Arizona 85067-3589
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 www.water.az.gov

**Well Driller Report
 and
 Well Log**

Pg. 1/2



FILE NUMBER
A(11-10) 23 ACA
 WELL REGISTRATION NUMBER
55-221744
 PERMIT NUMBER (IF ISSUED)

* This report should be prepared by the driller in detail and filed with the Department within 30 days following completion of the well.

** PLEASE PRINT CLEARLY **

SECTION 1. DRILLING AUTHORIZATION	
Mail To:	Drilling Firm
	NAME AERO DRILLING AND PUMPS, INC.
	DWR LICENSE NUMBER 108
	ADDRESS P.O. BOX 499
	TELEPHONE NUMBER 928-474-2376
	CITY/STATE/ZIP PAYSON, AZ 85547-0499
	FAX

SECTION 2. REGISTRY INFORMATION	
Well Owner	Location of Well
FULL NAME OF COMPANY, ORGANIZATION OR INDIVIDUAL BOB HARDMAN	WELL LOCATION ADDRESS (IF ANY) 8211 W. Baranca Rd.
MAILING ADDRESS 8211 W. BARRANCA RD.	TOWNSHIP (N/S) RANGE (E/W) SECTION 160 ACRE 40 ACRE 10 ACRE 11N 10E 23 NE 1/4 SW 1/4 NE 1/4
CITY / STATE / ZIP PAYSON, AZ 85541	LATITUDE LONGITUDE 34 ° 17 ' 3.8 " N 111 ° 17 ' 48.4 " W Degrees Minutes Seconds Degrees Minutes Seconds
CONTACT PERSON NAME AND TITLE	METHOD OF LATITUDE / LONGITUDE (CHECK ONE) <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Conventional Survey <input checked="" type="checkbox"/> *GPS: Hand-Held <input type="checkbox"/> *GPS: Survey-Grade
TELEPHONE NUMBER 928-474-3827	FAX
LAND SURFACE ELEVATION AT WELL 5154	Feet Above Sea Level
WELL NAME (e.g., MW-1, PZ-3, Lot 25 Well, Smith Well, etc.)	METHOD OF ELEVATION (CHECK ONE) <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Conventional Survey <input checked="" type="checkbox"/> *GPS: Hand-Held <input type="checkbox"/> *GPS: Survey-Grade
*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (CHECK ONE) <input checked="" type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):	
COUNTY Gila	ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL 302 34 469C

SECTION 3. WELL CONSTRUCTION DETAILS		
Drill Method	Method of Well Development	Method of Sealing at Reduction Points
CHECK ONE <input checked="" type="checkbox"/> Air Rotary <input type="checkbox"/> Bored or Augered <input type="checkbox"/> Cable Tool <input type="checkbox"/> Dual Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Reverse Circulation <input type="checkbox"/> Driven <input type="checkbox"/> Jetted <input type="checkbox"/> Air Percussion / Odex Tubing <input type="checkbox"/> Other (please specify)	CHECK ONE <input checked="" type="checkbox"/> Airlift <input type="checkbox"/> Bail <input type="checkbox"/> Surge Back <input type="checkbox"/> Surge Pump <input type="checkbox"/> Other (please specify)	CHECK ONE <input checked="" type="checkbox"/> None <input type="checkbox"/> Packed <input type="checkbox"/> Swedged <input type="checkbox"/> Welded <input type="checkbox"/> Other (please specify)
	Condition of Well	Construction Dates
	CHECK ONE <input checked="" type="checkbox"/> Capped <input type="checkbox"/> Pump Installed	DATE WELL CONSTRUCTION STARTED 1/29/13 DATE WELL CONSTRUCTION COMPLETED 1/30/13

SYM

I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the best of my knowledge and belief.

DRILLING FIRM Aero Drilling & Pumps, Inc.	SIGNATURE OF QUALIFYING PARTY <i>Chris Miller</i>	DATE 1/30/13
--	--	-----------------

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Well Driller Report and Well Log

Pg. 2/2
WELL REGISTRATION NUMBER
55-221744

SECTION 4. WELL CONSTRUCTION DESIGN (AS BUILT) (attach additional page if needed)

DEPTH OF BORING 400 Feet Below Land Surface	DEPTH OF COMPLETED WELL 400 Feet Below Land Surface
--	--

Water Level Information			
STATIC WATER LEVEL 213 Feet Below Land Surface	DATE MEASURED 1/30/13	TIME MEASURED	IF FLOWING WELL, METHOD OF FLOW REGULATION <input type="checkbox"/> Valve <input type="checkbox"/> Other:

Borehole			Installed Casing													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE (X)				PERFORATION TYPE (X)					SLOT SIZE IF ANY (inches)	
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED		IF OTHER TYPE, DESCRIBE
0	20	10	0	20	6	X										
20	400	6	0	340	4.5		X									
			340	400	4.5		X							Drilled	1/4 X 16	

Installed Annular Material												
DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (X)						FILTER PACK				
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	20			X								



ARIZONA DEPARTMENT OF WATER RESOURCES
 Information Management Unit
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 www.water.az.gov

Pump Installation Completion Report

Pg. 1/2

- Review instructions prior to completing form
 - The registered well owner should file this report with the Department within 30 days following installation of pump equipment
- ** PLEASE PRINT CLEARLY **

RECEIVED
 APR 03 2013

FILE NUMBER
A(11-10) 23 ADD
 WELL REGISTRATION NUMBER
55-220768

SECTION 1. REGISTRY INFORMATION

Well Owner		ARIZONA DEPARTMENT OF WATER RESOURCES	
FULL NAME OF COMPANY, ORGANIZATION OR INDIVIDUAL		WELL LOCATION ADDRESS (IF KNOWN)	
RANDALL COOK		8071 W. SEPIA ROAD	
MAILING ADDRESS		TOWNSHIP (N/S)	RANGE (E/W)
8071 W. SEPIA ROAD		11N	10E
CITY / STATE / ZIP		SECTION	160 ACRE
PAYSON, AZ 85541		23	NE 1/4
CONTACT PERSON NAME AND TITLE		40 ACRE	10 ACRE
		SE 1/4	SE 1/4
TELEPHONE NUMBER		COUNTY ASSESSOR'S PARCEL ID NUMBER (MOST RECENT)	
928-474-9640	FAX	BOOK	MAP
		302	34
		PARCEL	003D
		COUNTY WHERE WELL IS LOCATED	
		GILA	

SECTION 2. EQUIPMENT INSTALLED

DATE PUMP INSTALLED	Pitless Adaptor	
9-4-12	CHECK ONE (SEE INSTRUCTIONS FOR DEFINITION)	
Pump Type	Was a pitless adaptor installed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
CHECK ONE	IF YES, DEPTH BELOW GROUND LEVEL THE DEVICE WAS INSTALLED _____ Feet	
<input type="checkbox"/> Air Lift	Power Type	
<input type="checkbox"/> Bucket	CHECK ONE	
<input type="checkbox"/> Centrifugal	<input type="checkbox"/> Diesel Engine	
<input type="checkbox"/> Jet	<input checked="" type="checkbox"/> Electric Motor	
<input type="checkbox"/> Piston	<input type="checkbox"/> Gasoline Engine	
<input type="checkbox"/> Rotary	<input type="checkbox"/> Hand	
<input checked="" type="checkbox"/> Submersible	<input type="checkbox"/> Natural Gas	
<input type="checkbox"/> Turbine	<input type="checkbox"/> Windmill	
<input type="checkbox"/> Other (please specify)	<input type="checkbox"/> Other (please specify)	
RATED PUMP CAPACITY	HORSE POWER RATING OF MOTOR	
15 Gallons Per Minute	1.5	

SECTION 3. WELL TEST

Pump Test Data	Method of Discharge Measurement	Method of Measuring Water Level
DATE WELL TESTED	CHECK ONE	CHECK ONE
9/4/12	<input type="checkbox"/> Bailer	<input type="checkbox"/> Air Line
STATIC WATER LEVEL (A)	<input checked="" type="checkbox"/> Bucket - Barrel - Stopwatch	<input checked="" type="checkbox"/> Electric Measuring Line (Sonder)
276 Feet Below Land Surface	<input type="checkbox"/> Current	<input type="checkbox"/> Steel Tape
PUMPING WATER LEVEL (B)	<input type="checkbox"/> Estimated - Air Lift	<input type="checkbox"/> Other (please specify)
281 Feet Below Land Surface	<input type="checkbox"/> Gauge	
DRAWDOWN [(B) - (A)]	<input type="checkbox"/> Meter	
15	<input type="checkbox"/> Orifice	
TEST PUMPING RATE	<input type="checkbox"/> Volume	
15 Gallons Per Minute	<input type="checkbox"/> Weir - Flume	
DURATION OF PUMP TEST (Minimum 4 Hours)	<input type="checkbox"/> Other (please specify)	
4 HR.		
TOTAL PUMPING LIFT		
281 Feet		
FOR FLOWING WELL, MEASURED SHUT IN HEAD		
N/A <input type="checkbox"/> FT <input type="checkbox"/> PSI		

SYM

I HEREBY CERTIFY that the above statements are true to the best of my knowledge and belief according to A.R.S § 45-600(B)

SIGNATURE OF WELL OWNER: *Randall Cook, Frances C Cook* DATE: 9-4-12

SECTION 4. WELL CONSTRUCTION DESIGN (AS BUILT) (attach additional page if needed)

DEPTH OF BORING 400 Feet Below Land Surface	DEPTH OF COMPLETED WELL 400 Feet Below Land Surface
--	--

Water Level Information	
STATIC WATER LEVEL 276 Feet Below Land Surface	DATE MEASURED 9/4/12 TIME MEASURED _____ IF FLOWING WELL, METHOD OF FLOW REGULATION <input type="checkbox"/> Valve <input type="checkbox"/> Other:

Borehole			Installed Casing										SLOT SIZE IF ANY (inches)			
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE (X)			PERFORATION TYPE (X)							
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN		MILLS KNIFE	SLOTTED	IF OTHER TYPE, DESCRIBE
0	20	10	0	20	6	X				X						
20	400	6	0	340	4.5		X			X						
			340	400	4.5		X							Drilled	1/4 X 16	

Installed Annular Material												
DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (X)							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	20			X								



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Pump Installation Completion Report

Pg. 1/2

RECEIVED
 APR 04 2013

FILE NUMBER
A(11-10) 23 ADD
 WELL REGISTRATION NUMBER
55-220767

- * Review instructions prior to completing form
- * The registered well owner should file this report with the Department within 30 days following installation of pump equipment
- ** PLEASE PRINT CLEARLY **

SECTION 1. REGISTRY INFORMATION		ARIZONA DEPARTMENT OF WATER RESOURCES	
Well Owner FULL NAME OF COMPANY, ORGANIZATION OR INDIVIDUAL WESLEY COOK		Location of Well WELL LOCATION ADDRESS (IF KNOWN) 8058 W. HALLWAY DR.	
MAILING ADDRESS 8058 W. HALLWAY DR.		TOWNSHIP (N/S) 11N	RANGE (E/W) 10E
CITY / STATE / ZIP PAYSON, AZ 85541		SECTION 23	160 ACRE NE 1/4
CONTACT PERSON NAME AND TITLE		40 ACRE SE 1/4	10 ACRE SE 1/4
TELEPHONE NUMBER 928-474-7805	FAX	COUNTY ASSESSOR'S PARCEL ID NUMBER (MOST RECENT) BOOK 302 MAP 34 PARCEL 005A	
		COUNTY WHERE WELL IS LOCATED GILA	

SECTION 2. EQUIPMENT INSTALLED	
DATE PUMP INSTALLED 9/10/12	Pitless Adaptor CHECK ONE (SEE INSTRUCTIONS FOR DEFINITION) Was a pitless adaptor installed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No IF YES, DEPTH BELOW GROUND LEVEL THE DEVICE WAS INSTALLED 2 Feet
Pump Type CHECK ONE <input type="checkbox"/> Air Lift <input type="checkbox"/> Bucket <input type="checkbox"/> Centrifugal <input type="checkbox"/> Jet <input type="checkbox"/> Piston <input type="checkbox"/> Rotary <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Other (please specify)	Power Type CHECK ONE <input type="checkbox"/> Diesel Engine <input checked="" type="checkbox"/> Electric Motor <input type="checkbox"/> Gasoline Engine <input type="checkbox"/> Hand <input type="checkbox"/> Natural Gas <input type="checkbox"/> Windmill <input type="checkbox"/> Other (please specify)
RATED PUMP CAPACITY 12 Gallons Per Minute	HORSE POWER RATING OF MOTOR 1

SECTION 3. WELL TEST		
Pump Test Data	Method of Discharge Measurement	Method of Measuring Water Level
DATE WELL TESTED 9/10/12	CHECK ONE <input type="checkbox"/> Bailer <input checked="" type="checkbox"/> Bucket - Barrel - Stopwatch <input type="checkbox"/> Current <input type="checkbox"/> Estimated - Air Lift <input type="checkbox"/> Gauge <input type="checkbox"/> Meter <input type="checkbox"/> Orifice <input type="checkbox"/> Volume <input type="checkbox"/> Weir - Flume <input type="checkbox"/> Other (please specify)	CHECK ONE <input type="checkbox"/> Air Line <input checked="" type="checkbox"/> Electric Measuring Line (Sonder) <input type="checkbox"/> Steel Tape <input type="checkbox"/> Other (please specify)
STATIC WATER LEVEL (A) 234 Feet Below Land Surface		
PUMPING WATER LEVEL (B) 256 Feet Below Land Surface		
DRAWDOWN [(B) - (A)] 22		
TEST PUMPING RATE 12 Gallons Per Minute		
DURATION OF PUMP TEST (Minimum 4 Hours) 4 Hours		
TOTAL PUMPING LIFT 256 Feet		
FOR FLOWING WELL, MEASURED SHUT IN HEAD N/A <input type="checkbox"/> FT <input type="checkbox"/> PSI		

SYM

I HEREBY CERTIFY that the above statements are true to the best of my knowledge and belief according to A.R.S § 45-600(B)

SIGNATURE OF WELL OWNER: *Wesley Cook* DATE: 9/10/12

SECTION 4. WELL CONSTRUCTION DESIGN (AS BUILT) (attach additional page if needed)

DEPTH OF BORING 400 Feet Below Land Surface	DEPTH OF COMPLETED WELL 400 Feet Below Land Surface
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Water Level Information			
STATIC WATER LEVEL 234 Feet Below Land Surface	DATE MEASURED 9/10/12	TIME MEASURED	IF FLOWING WELL, METHOD OF FLOW REGULATION <input type="checkbox"/> Valve <input type="checkbox"/> Other:

Borehole			Installed Casing													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE (X)				PERFORATION TYPE (X)					SLOT SIZE IF ANY (inches)	
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED		IF OTHER TYPE, DESCRIBE
0	20	10	0	20	6	X				X						
20	400	6	0	340	4.5		X			X						
			340	400	4.5		X							Drilled	1/4 X 16	

Installed Annular Material												
DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (X)							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	20			X								



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**Well Driller Report
 and
 Well Log**

11-1-12
 BSW
 Pg. 1/2

* This report should be prepared by the driller in detail and filed with the Department within 30 days following completion of the well.

OCT 03 2012

** PLEASE PRINT CLEARLY **

FILE NUMBER
A(11-10) 23 ADC
 WELL REGISTRATION NUMBER
55-221636
 PERMIT NUMBER (IF ISSUED)

Mail To:	SECTION 1. DRILLING AUTHORIZATION	
	Drilling Firm	
	NAME AERO DRILLING AND PUMPS, INC.	DWR LICENSE NUMBER 108
	ADDRESS P.O. BOX 499	TELEPHONE NUMBER 928-474-2376
	CITY/STATE/ZIP PAYSON, AZ 85547-0499	FAX

SECTION 2. REGISTRY INFORMATION	
Well Owner	Location of Well
FULL NAME OF COMPANY, ORGANIZATION OR INDIVIDUAL DUMITRU HITICAS	WELL LOCATION ADDRESS (IF ANY) 8129 W. Sepia Rd.
MAILING ADDRESS 7333 A. ACOMA	TOWNSHIP (N/S) RANGE (E/W) SECTION 11N 10E 23
CITY / STATE / ZIP PEORIA, AZ 85381	160 ACRE 40 ACRE 10 ACRE NE 1/4 SE 1/4 SW 1/4
CONTACT PERSON NAME AND TITLE	LATITUDE LONGITUDE 34° 17' 3.1" N 111° 17' 37.2" W Degrees Minutes Seconds
TELEPHONE NUMBER 602-751-0756	METHOD OF LATITUDE / LONGITUDE (CHECK ONE) <input checked="" type="checkbox"/> *GPS: Hand-Held <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade
FAX	LAND SURFACE ELEVATION AT WELL 5180 Feet Above Sea Level
WELL NAME (e.g., MW-1, PZ-3, Lot 25 Well, Smith Well, etc.)	METHOD OF ELEVATION (CHECK ONE) <input checked="" type="checkbox"/> *GPS: Hand-Held <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade
	*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (CHECK ONE) <input checked="" type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):
	COUNTY ASSESSOR'S PARCEL ID NUMBER Gila BOOK 302 MAP 34 PARCEL 003B

SECTION 3. WELL CONSTRUCTION DETAILS		
Drill Method	Method of Well Development	Method of Sealing at Reduction Points
CHECK ONE <input checked="" type="checkbox"/> Air Rotary <input type="checkbox"/> Bored or Augered <input type="checkbox"/> Cable Tool <input type="checkbox"/> Dual Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Reverse Circulation <input type="checkbox"/> Driven <input type="checkbox"/> Jetted <input type="checkbox"/> Air Percussion / Odex Tubing <input type="checkbox"/> Other (please specify)	CHECK ONE <input checked="" type="checkbox"/> Airlift <input type="checkbox"/> Bail <input type="checkbox"/> Surge Back <input type="checkbox"/> Surge Pump <input type="checkbox"/> Other (please specify)	CHECK ONE <input checked="" type="checkbox"/> None <input type="checkbox"/> Packed <input type="checkbox"/> Swedged <input type="checkbox"/> Welded <input type="checkbox"/> Other (please specify)
	Condition of Well	Construction Dates
	CHECK ONE <input type="checkbox"/> Capped <input checked="" type="checkbox"/> Pump Installed	DATE WELL CONSTRUCTION STARTED 8/30/12 DATE WELL CONSTRUCTION COMPLETED 9/3/12

I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the best of my knowledge and belief.

DRILLING FIRM Aero Drilling & Pumps, Inc.	SIGNATURE OF QUALIFYING PARTY <i>Chris Nulien</i>	DATE 9/3/12
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Well Driller Report and Well Log

WELL REGISTRATION NUMBER
55-221636

SECTION 4. WELL CONSTRUCTION DESIGN (AS BUILT) (attach additional page if needed)

DEPTH OF BORING 400 Feet Below Land Surface	DEPTH OF COMPLETED WELL 400 Feet Below Land Surface
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Water Level Information

STATIC WATER LEVEL 252 Feet Below Land Surface	DATE MEASURED 9/3/12	TIME MEASURED	IF FLOWING WELL, METHOD OF FLOW REGULATION <input type="checkbox"/> Valve <input type="checkbox"/> Other:
--	-------------------------	---------------	--

Borehole			Installed Casing														
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE (X)				PERFORATION TYPE (X)					SLOT SIZE IF ANY (inches)		
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED		IF OTHER TYPE, DESCRIBE	
0	20	10	0	20	6	X				X							
20	400	6	0	340	4.5		X			X							
			340	400	4.5		X								Drilled	1/4 X 16	

Installed Annular Material												
DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (X)						FILTER PACK				
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	20			X								



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 JUL 8 2011
WATER MGMT

**Well Driller Report
 and
 Well Log**

* This report should be prepared by the driller in detail and filed with the Department within 30 days following completion of the well.

** PLEASE PRINT CLEARLY **

FILE NUMBER
A(11-10) 23 ACA
 WELL REGISTRATION NUMBER
55- 220514
 PERMIT NUMBER (IF ISSUED)

Mail To:	SECTION 1. DRILLING AUTHORIZATION	
	Drilling Firm	
	NAME AERO DRILLING AND PUMPS, INC.	DWR LICENSE NUMBER 108
	ADDRESS P.O. BOX 499	TELEPHONE NUMBER 928-474-2376
	CITY/STATE/ZIP PAYSON, AZ 85547-0499	FAX

SECTION 2. REGISTRY INFORMATION	
Well Owner	Location of Well
FULL NAME OF COMPANY, ORGANIZATION OR INDIVIDUAL LOREN JOHNSON LIVING TRUST	WELL LOCATION ADDRESS (IF ANY) 7581 N. Yoya Vista
MAILING ADDRESS P.O. BOX 601	TOWNSHIP (N/S) RANGE (E/W) SECTION 11N 10E 23
CITY / STATE / ZIP PAYSON, AZ 85547	160 ACRE 40 ACRE 10 ACRE NE 1/4 SW 1/4 NE 1/4
CONTACT PERSON NAME AND TITLE	LATITUDE LONGITUDE 34° 17' 06.2" N 111° 17' 51.4" W Degrees Minutes Seconds Degrees Minutes Seconds
TELEPHONE NUMBER 928-474-5796	METHOD OF LATITUDE / LONGITUDE (CHECK ONE) <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Conventional Survey <input checked="" type="checkbox"/> *GPS: Hand-Held <input type="checkbox"/> *GPS: Survey-Grade
WELL NAME (e.g., MW-1, PZ-3, Lot 25 Well, Smith Well, etc.)	LAND SURFACE ELEVATION AT WELL 4890 Feet Above Sea Level
	METHOD OF ELEVATION (CHECK ONE) <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Conventional Survey <input checked="" type="checkbox"/> *GPS: Hand-Held <input type="checkbox"/> *GPS: Survey-Grade
	*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (CHECK ONE) <input checked="" type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):
	COUNTY ASSESSOR'S PARCEL ID NUMBER Gila BOOK 302 MAP 34 PARCEL 360

SECTION 3. WELL CONSTRUCTION DETAILS		
Drill Method	Method of Well Development	Method of Sealing at Reduction Points
CHECK ONE <input checked="" type="checkbox"/> Air Rotary <input type="checkbox"/> Bored or Augered <input type="checkbox"/> Cable Tool <input type="checkbox"/> Dual Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Reverse Circulation <input type="checkbox"/> Driven <input type="checkbox"/> Jetted <input type="checkbox"/> Air Percussion / Odex Tubing <input type="checkbox"/> Other (please specify)	CHECK ONE <input checked="" type="checkbox"/> Airlift <input type="checkbox"/> Bail <input type="checkbox"/> Surge Back <input type="checkbox"/> Surge Pump <input type="checkbox"/> Other (please specify)	CHECK ONE <input checked="" type="checkbox"/> None <input type="checkbox"/> Packed <input type="checkbox"/> Swedged <input type="checkbox"/> Welded <input type="checkbox"/> Other (please specify) SYM
	Condition of Well	Construction Dates
	CHECK ONE <input type="checkbox"/> Capped <input checked="" type="checkbox"/> Pump Installed	DATE WELL CONSTRUCTION STARTED 5/30/11 DATE WELL CONSTRUCTION COMPLETED 6/7/11

I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the best of my knowledge and belief.

DRILLING FIRM Aero Drilling & Pumps, Inc.	SIGNATURE OF QUALIFYING PARTY <i>[Signature]</i>	DATE 6/7/11
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Well Driller Report and Well Log

WELL REGISTRATION NUMBER
55-220514

SECTION 4. WELL CONSTRUCTION DESIGN (AS BUILT) (attach additional page if needed)

DEPTH OF BORING 400	Feet Below Land Surface	DEPTH OF COMPLETED WELL 400	Feet Below Land Surface
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Water Level Information			
STATIC WATER LEVEL 230	Feet Below Land Surface	DATE MEASURED 6/7/11	TIME MEASURED
		IF FLOWING WELL, METHOD OF FLOW REGULATION <input type="checkbox"/> Valve <input type="checkbox"/> Other:	

Borehole			Installed Casing													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE (X)				PERFORATION TYPE (X)					SLOT SIZE IF ANY (inches)	
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED		IF OTHER TYPE, DESCRIBE
0	20	10	0	20	6	X				X						
20	400	6	0	360	4.5		X			X						
			360	400	4.5		X								Drilled	1/4 X 16

Installed Annular Material												
DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (X)							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	20			X								



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Well Driller Report
 and
 Well Log

Pg. 1/3

THIS REPORT MUST BE FILED WITHIN 30 DAYS OF COMPLETING THE WELL.

PLEASE PRINT CLEARLY USING BLACK OR BLUE INK

FILE NUMBER
A(11-10)24 BCB
 WELL REGISTRATION NUMBER
55 - 913123
 PERMIT NUMBER (IF ISSUED)

RECEIVED

JUL 26 2011

SECTION 1. DRILLING AUTHORIZATION

Drilling Firm

Mail To:	NAME CENTRAL ARIZONA PUMP, L. L. C.	DWR LICENSE NUMBER 776
	ADDRESS 141 S. OLDHAM RD	TELEPHONE NUMBER 928-476-5440
	CITY / STATE / ZIP PAYSON, AZ, 85541	FAX

Well Owner

FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL
 MUELLER, KANDIS

Location of Well

WELL LOCATION ADDRESS (IF ANY)

MAILING ADDRESS 8022 W STALLION RD	TOWNSHIP (N/S) 11N	RANGE (E/W) 10E	SECTION 24	160 ACRE N/W 1/4	40 ACRE S/W 1/4	10 ACRE N/W 1/4
CITY / STATE / ZIP PAYSON, AZ, 85541	LATITUDE		"N	LONGITUDE		"W
CONTACT PERSON NAME AND TITLE	METHOD OF LATITUDE/LONGITUDE (CHECK ONE)			*GPS: Hand-Held		
TELEPHONE NUMBER 928 478-6887	FAX	LAND SURFACE ELEVATION AT WELL			Feet Above Sea Level	
WELL NAME (e.g., MW-1, PZ-3, lot 25 Well, Smith Well, etc.)	METHOD OF ELEVATION (CHECK ONE)			*GPS: Hand-Held		
		USGS Quad Map			Conventional Survey	
		*GPS: Survey-Grade				
*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (CHECK ONE)						
		NAD-83			Other (please specify)	
COUNTY		ASSESSOR'S PARCEL ID NUMBER (MOST RECENT)				
		BOOK 302	MAP 34	PARCEL 014H		

Drilling Method

CHECK ONE

- Air Rotary
- Bored or Augered
- Cable Tool
- Dual Rotary
- Mud Rotary
- Reverse Circulation
- Driven
- Jetted
- Air Percussion / Odex Tubing
- Other (please specify)

Method of Well Development

CHECK ONE

- Airlift
- Bail
- Surge Block
- Surge Pump
- Other (please specify)

Method of Sealing at Reduction Points

CHECK ONE

- None
- Packed
- Swedged
- Welded
- Other (please specify)

Condition of Well

CHECK ONE

- Capped
- Pump Installed

Construction Dates

DATE WELL CONSTRUCTION STARTED

5-15-11

DATE WELL CONSTRUCTION COMPLETED

6-18-11

I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the best of my knowledge and belief.

SIGNATURE OF QUALIFYING PARTY

Brandon Moore

DATE

6-6-11 SYM

Pg. 18 / 69

Well Driller Report and Well Log

WELL REGISTRATION NUMBER
55 - 913123

SECTION 4. WELL CONSTRUCTION DESIGN (AS BUILT) (attach additional page if needed)

Depth

DEPTH OF BORING

405

Feet Below Land Surface

DEPTH OF COMPLETED WELL

405

Feet Below Land Surface

Water Level Information

STATIC WATER LEVEL

120

Feet Below Land Surface

DATE MEASURED

6/25

TIME MEASURED

8:00

IF FLOWING WELL, METHOD OF FLOW REGULATION

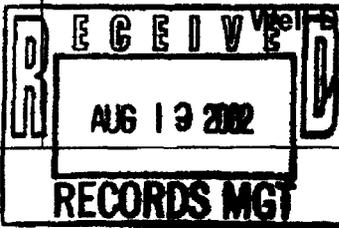
Valve Other:

Borehole			Installed Casing													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER (inches)	MATERIAL TYPE (1)				PERFORATION TYPE (1)					SLOT SIZE (inches)	
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED		IF OTHER TYPE, DESCRIBE
0	20	10	0	19	7	X				X						
20	400	6 1/2	0	280	4 1/2		X			X						
			200	400	4 1/2		X						X			

Installed Annular Material												
DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (1)							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	20		X									



ARIZONA DEPARTMENT OF WATER RESOURCES
 Records Management Section
 500 N. 3rd Street * Phoenix, Arizona 85004
 (602) 417-2405 * (800) 352-8488
 www.water.az.gov



Well Driller Report
 and
 Well Log

Pg. 1/2

FILE NUMBER
A(11-10) 24 BDB
 WELL REGISTRATION NUMBER
55-592209
 PERMIT NUMBER (IF ISSUED)

- Review instructions prior to completing form
- This report should be prepared by the driller in detail and filed with the Department within 30 days following completion of the well.

**** PLEASE PRINT CLEARLY ****

SECTION 1. REGISTRY INFORMATION

Well Owner		Location of Well					
FULL NAME OF COMPANY, ORGANIZATION OR INDIVIDUAL JOHN STRAIT		WELL LOCATION ADDRESS (IF KNOWN)					
MAILING ADDRESS HC8 BOX 700-S		TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE
CITY / STATE / ZIP PAYSON, AZ 85541		11	10	24	NW 1/4	SE 1/4	NW 1/4
CONTACT PERSON NAME AND TITLE		LATITUDE		LONGITUDE			
TELEPHONE NUMBER 928-474-1713		LAND SURFACE ELEVATION AT WELL		Feet Above Sea Level			
FAX		METHOD OF LATITUDE / LONGITUDE (CHECK ONE)					
		<input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Conventional Survey <input type="checkbox"/> GPS : <input type="checkbox"/> Hand-Held <input type="checkbox"/> Survey-Grade					
		COUNTY ASSESSOR'S PARCEL ID NUMBER					
		BOOK	MAP	PARCEL			
		301	16	071B			
		COUNTY WHERE WELL IS LOCATED GILA					

SECTION 2. DRILLING AUTHORIZATION

Drilling Firm	
NAME CENTRAL ARIZONA DRILLING COMPANY	
DWR LICENSE NUMBER 495	
TELEPHONE NUMBER 520-476-2920	FAX

SECTION 3. WELL CONSTRUCTION DETAILS

DATE WELL CONSTRUCTION STARTED 7 19 02	DATE WELL CONSTRUCTION COMPLETED 7 21 02	IF FLOWING WELL, METHOD OF FLOW REGULATION <input type="checkbox"/> Valve <input type="checkbox"/> Other
Drill Method	Method of Well Development	Method of Sealing at Reduction Points
CHECK ONE <input checked="" type="checkbox"/> Air Rotary <input type="checkbox"/> Bored or Augered <input type="checkbox"/> Cable Tool <input type="checkbox"/> Dual Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Reverse Circulation <input type="checkbox"/> Driven <input type="checkbox"/> Jetted <input type="checkbox"/> Air Percussion / Odex Tubing <input type="checkbox"/> Other (please specify)	CHECK ONE <input checked="" type="checkbox"/> Airlift <input type="checkbox"/> Bail <input type="checkbox"/> Surge Back <input type="checkbox"/> Surge Pump <input type="checkbox"/> Other (please specify)	CHECK ONE <input type="checkbox"/> None <input type="checkbox"/> Packed <input type="checkbox"/> Swedged <input type="checkbox"/> Welded <input type="checkbox"/> Other (please specify) GROUT
Water Level Information		
STATIC WATER LEVEL 80 Feet Below Land Surface		
DATE MEASURED 7 21 02		

ANSWERED SEP 26 2002

Well Driller Report and Well Log

WELL REGISTRATION NUMBER
55-592209

SECTION 4. WELL CONSTRUCTION DESIGN (AS BUILT) (attach additional page if needed)

Borehole			Installed Casing													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE (X)				PERFORATION TYPE (X)					SLOT SIZE IF ANY (inches)	
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED		IF OTHER TYPE, DESCRIBE
0	20	10"				X										
			26	205	6"		X									
			100	205									X			1/8" x 4"

Installed Annular Material												
DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (X)							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	20					X						

DEPTH OF BORING 205 Feet Below Land Surface	DEPTH OF COMPLETED WELL 205 Feet Below Land Surface
---	---

DWR-55-55B-10/01 (Rev.)

ANSWERED SEP 26 2002

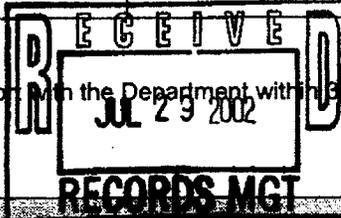


Arizona Department of Water Resources
 Records Management Section
 500 N. 3rd Street + Phoenix, Arizona 85004
 (602) 417-2405 + (800) 352-8488
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Pump Installation Completion Report

Pg. 1/2

- Review instructions prior to completing form.
- The registered well owner should file this report with the Department within 90 days following installation of pump equipment.



FILE NUMBER
WELL REGISTRATION NUMBER 55-592680

** PLEASE PRINT CLEARLY **

SECTION 1: REGISTRY INFORMATION	
Well Owner	Location of Well
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL <i>BENT AND RITA ANDERSEN</i>	WELL LOCATION ADDRESS (IF ANY) <i>HALLWAY 6 F</i>
MAILING ADDRESS <i>P.O. BOX 2147</i>	TOWNSHIP (N/S) RANGE (E/W) SECTION 160 ACRE 40 ACRE 10 ACRE <i>11 N R10 E 23 NE 1/4 SE 1/4 SE 1/4</i>
CITY / STATE / ZIP CODE <i>DAYSON, AZ 85547</i>	COUNTY ASSESSOR'S PARCEL ID NUMBER (MOST RECENT) BOOK MAP PARCEL - <u>NO</u> W F <i>302 34 00682</i>
CONTACT PERSON NAME AND TITLE <i>BENT OR RITA</i>	COUNTY WHERE WELL IS LOCATED
TELEPHONE NUMBER FAX <i>928-474-1709</i>	

SECTION 2: EQUIPMENT INSTALLED	
DATE PUMP INSTALLED	
Pump Type CHECK ONE	Power Type CHECK ONE
<input type="checkbox"/> Air Lift <input checked="" type="checkbox"/> Bucket <input type="checkbox"/> Centrifugal <input type="checkbox"/> Jet <input type="checkbox"/> Piston <input type="checkbox"/> Rotary <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Other (please specify):	<input type="checkbox"/> Diesel Engine <input checked="" type="checkbox"/> Electric Motor <input type="checkbox"/> Gasoline Engine <input type="checkbox"/> Hand <input type="checkbox"/> Natural Gas <input type="checkbox"/> Windmill <input type="checkbox"/> Other (please specify):
RATED PUMP CAPACITY <i>5</i> Gallons Per Minute	HORSE POWER RATING OF MOTOR <i>3/4</i>

SECTION 3: WELL TEST		
Pump Test Data	Method of Discharge Measurement	Method of Measuring Water Level
DATE WELL TESTED <i>7-1-02</i>	CHECK ONE	CHECK ONE
STATIC WATER LEVEL (A) <i>189</i> Feet Below Land Surface	<input type="checkbox"/> Bailer <input checked="" type="checkbox"/> Bucket - Barrel - Stopwatch <input type="checkbox"/> Current <input type="checkbox"/> Estimated - Air Lift <input type="checkbox"/> Gauge <input type="checkbox"/> Meter <input type="checkbox"/> Orifice <input type="checkbox"/> Volume <input type="checkbox"/> Weir - Flume <input type="checkbox"/> Other (please specify):	<input type="checkbox"/> Air Line <input checked="" type="checkbox"/> Electric Measuring Line (Sounder) <input type="checkbox"/> Steel Tape <input type="checkbox"/> Other (please specify):
PUMPING WATER LEVEL (B) <i>3/4</i> Feet Below Land Surface		
DRAWDOWN [(B) - (A)] <i>125</i> Feet Below Land Surface		
TEST PUMPING RATE <i>5</i> Gallons Per Minute		
DURATION OF PUMP TEST (Minimum 4 Hours) <i>4</i> Hours		
TOTAL PUMPING LIFT <i>315</i> Feet		
FOR FLOWING WELL, MEASURED SHUT IN HEAD	<input type="checkbox"/> FT <input type="checkbox"/> PSI	

ANSWERED AUG 22 2002

I HEREBY CERTIFY that the above statements are true to the best of my knowledge and belief according to A.R.S. § 45-600(B).	
SIGNATURE OF WELL OWNER <i>Bent Andersen</i>	DATE <i>07-24-02</i>

Pg. 23/69

Well Driller Report and Well Log

WELL REGISTRATION NUMBER
55-592680

SECTION 4: WELL CONSTRUCTION DESIGN (AS BUILT) (attach additional page if needed)

Borehole			Installed Casing													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE (X)				PERFORATION TYPE (X)					SLOT SIZE IF ANY (inches)	
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED		IF OTHER TYPE, DESCRIBE
0	20	10	0	20	6	X				X						
0	360	6	0	320	4.5	X				X						
			320	360	4.5	X								Drilled		1/4 x 20

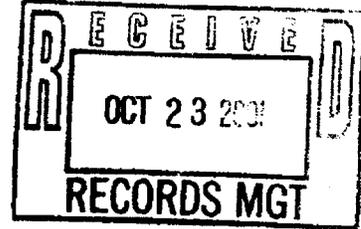
Installed Annular Material												
DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (X)						FILTER PACK				
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
0	20			X								

DEPTH OF BORING 360	Feet Below Land Surface	DEPTH OF COMPLETED WELL 360	Feet Below Land Surface
------------------------	-------------------------	--------------------------------	-------------------------

ARIZONA DEPARTMENT OF WATER RESOURCES
500 North 3rd Street
Phoenix, Arizona 85004

WELL DRILLER REPORT

This report should be prepared by the driller in all detail and filed with the Department within 30 days following completion of the well.



1. AERO DRILLING AND PUMPS, INC.
P.O. BOX 499
PAYSON, AZ 85547-0499

2. Owner Name: Brooke Utilities
Address: 1011 S. Stover Rd., Payson, AZ 85541
City State Zip

3. Location: 11N N/S 10E E/W 23 1/4 NW 1/4 SE 1/4 NE
Township Range Section 10-acre 40-acre 160-acre

4. Well Registration No. 55-585747 (Required)

5. Permit No. N/A (If Issued)

DESCRIPTION OF WELL

6. Total depth of hole 400 ft.

7. Type of casing Steel & PVC

8. Diameter and length of casing 6" st 1 in. from 0 to 23, 4.5" PVC in from 0 to 400

9. Method of sealing at reduction points Adapter

10. Perforated from 360 to 400, from to from to

11. Size of cuts 1/2" holes Number of cuts per foot 20

12. If screen was installed: Length N/A ft. Diam in. Type

13. Method of construction Drilled
(drilled, dug, driven, bored, jetted, etc)

14. Date started 9/25/01
Month Day Year

15. Date completed 9/25/01
Month Day Year

16. Depth to water 155 ft. (If flowing well, so state)

17. Describe point from which depth measurements were made, and give sea level elevation if available
Surface

18. If flowing well, state method of flow regulation: N/A

19. Remarks: _____

DO NOT WRITE IN THIS SPACE
OFFICE RECORD
Registration No. 55- 585747
File No. A(11-10) 23 ADB
Received _____ By _____
Entered _____ By _____

ARIZONA DEPARTMENT OF WATER RESOURCES

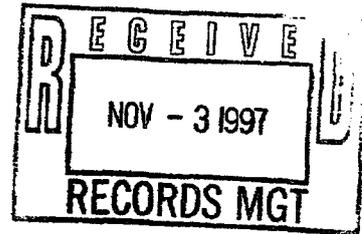
500 North Third Street

Phoenix, Arizona 85004

WELL DRILLER REPORT

This report should be prepared by the driller in all detail and filed with the Department within 30 days following completion of the well.

Pg. 1/2



1. AERO DRILL & PUMPS, INC.
P.O. BOX 499
PAYSON, AZ 85547

2. Owner Name: Patti Caldwell
Address:
City State Zip

3. Location: 11N N/S 10E E/W 23 1/4 SW 1/4 NW 1/4 NE
Township Range Section 10-acre 40-acre 160-acre

4. Well Registration No. 55-560398 (Required)

5. Permit No. N7A (If issued)

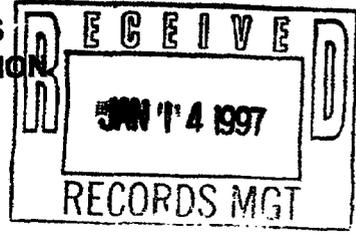
DESCRIPTION OF WELL

- 6. Total depth of hole 440 ft.
7. Type of casing Steel & PVC
8. Diameter and length of casing 6" stl in. from 0 to 21, 4.5" PVC from 0 to 440
9. Method of sealing at reduction points Adapter
10. Perforated from 260 to 300, from 400 to 440 from to
11. Size of cuts 1/4" holes Number of cuts per foot 20
12. If screen was installed: Length N/A ft. Diam in. Type
13. Method of construction Drilled
(drilled, dug, driven, bored, jetted, etc)
14. Date started 9/28/97
Month Day Year
15. Date completed 9/30/97
Month Day Year
16. Depth to water 198 ft. (If flowing well, so state)
17. Describe point from which depth measurements were made, and give sea-level elevation if available
Surface
18. If flowing well, state method of flow regulation: N/A

19. Remarks:

DO NOT WRITE IN THIS SPACE
OFFICE RECORD
Registration No. 55-560398
File No. A(11-10)23 ABC
Received By
Entered By
ENTERED NOV 03 1997

STATE OF ARIZONA
DEPARTMENT OF WATER RESOURCES
GROUNDWATER MANAGEMENT SUPPORT SECTION
500 North Third Street - Phoenix, Arizona 85004-3903
Phone (602) 417-2470



WELL DRILLER REPORT

This report should be prepared by the Driller in all detail and filed with the Department within 30 days following completion of the well.

- 1. Owner's Name: Richard & Darla Lohr
Address: HCR Box 588A, Payson, AZ 85541
Street City State Zip Telephone Number
- 2. Drilling Firm: Aero Drilling & Pumps, Inc.
Address: P.O. Box 499, Payson, AZ 85547
Street City State Zip Telephone Number
- 3. Location: SW 1/4 NE 1/4 NE 1/4 of Section 23 Township 11N Range 10E
10 Acre 40 Acre 160 Acre
- 4. Well Registration No. 55-558959 (Required)
- 5. Permit No. N/A (If issued)

DESCRIPTION OF WELL

- 6. Total Depth of Hole 300 ft.
- 7. Type of Casing Steel & PVC
- 8. Diameter and length of casing 6" stl inches from 0 to 21, 4.5" PVC inches from 0 to 300
- 9. Method of sealing at reduction points Adapter
- 10. Perforated from 260 to 300 from _____ to _____ from _____ to _____
- 11. Size of cuts 1/4" holes Number of cuts per foot 20
- 12. If screen was installed: Length N/A feet. Diameter _____ inches. Type _____
- 13. Method of construction Drilled
(drilled, dug, driven, bored, jetted, etc.)
- 14. Date started 12/13/96
Month Day Year
- 15. Date completed 12/14/96
Month Day Year
- 16. Depth to water 265 ft. (If flowing well, so state).
- 17. Describe point from which depth measurements were made, and give sea-level elevation if available surface

- 18. If flowing well, state method of flow regulation: N/A
- 19. Remarks: _____

FOR DEPARTMENT USE ONLY

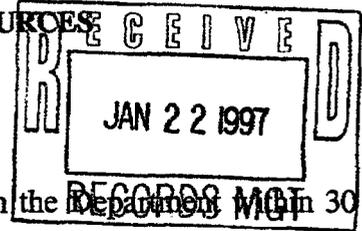
Registration No. _____

File No. _____

Received _____ By _____

Entered **ENTERED JAN 16 1997** By _____

ARIZONA DEPARTMENT OF WATER RESOURCES
500 North Third Street
Phoenix, Arizona 85004
WELL DRILLER REPORT



This report should be prepared by the driller in all detail and filed with the Department in 30 days following completion of the well.

- 1. AERO DRILLING & PUMPS
PO BOX 499
PAYSON AZ 85547
- 2. Owner Name: R.J. Marsh
Address: HC3 Box 519-M, Payson, AZ 85541
Street City State Zip
- 3. Location: 11N N/S 10E E/W 23 1/4 SE 1/4 NW 1/4 SE
Township Range Section 10-acre 40-acre 160-acre
- 4. Well Registration No. 55-556430 (Required)
- 5. Permit No. N/A (If issued)

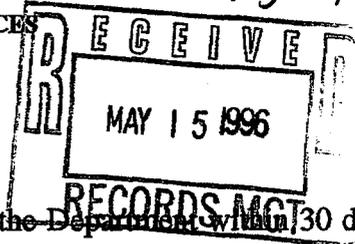
DESCRIPTION OF WELL

- 6. Total depth of hole 300 ft.
- 7. Type of casing Steel & PVC
- 8. Diameter and length of casing 6" stl in. from 0 to 24, 4.5" PVC in from 0 to 300
- 9. Method of sealing at reduction points Adapter
- 10. Perforated from 260 to 300, from _____ to _____ from _____ to _____
- 11. Size of cuts 1/2" holes Number of cuts per foot 20
- 12. If screen was installed: Length N/A ft. Diam _____ in. Type _____
- 13. Method of construction Drilled
(drilled, dug, driven, bored, jetted, etc)
- 14. Date started 12/27/96
- 15. Date completed 12/28/96
Month Day Year
- 16. Depth to water 185 ft. (If flowing well, so state)
- 17. Describe point from which depth measurements were made, and give sea-level elevation if available
Surface
- 18. If flowing well, state method of flow regulation: N/A
- 19. Remarks: _____

DO NOT WRITE IN THIS SPACE
OFFICE RECORD

Registration No. 55-556430
File No. A(11-10)23 DBD
Received _____ By _____
Entered _____ By _____
ENTERED JAN 23 1997

ARIZONA DEPARTMENT OF WATER RESOURCES
500 North Third Street
Phoenix, Arizona 85004



WELL DRILLER REPORT

This report should be prepared by the driller in all detail and filed with the Department within 30 days following completion of the well.

1. AERO DRILLING & PUMPS, INC.
P. O. BOX 499
PAYSON, AZ 85547

2. Owner Name: Lisa Harmon
Address: HC3 Box 593-I, Payson, AZ 85541
Street City State Zip

3. Location: 11N N/S 10E E/W 23 1/4 NE 1/4 NW 1/4 NE
Township Range Section 10-acre 40-acre 160-acre

4. Well Registration No. 55-553798 (Required)
5. Permit No. N/A (If issued)

DESCRIPTION OF WELL

6. Total depth of hole 360 ft.
7. Type of casing Steel & PVC
8. Diameter and length of casing 6" st 1 in. from 0 to 21, 4.5" PVC from 0 to 360
9. Method of sealing at reduction points Adapter
10. Perforated from 320 to 360, from to from to
11. Size of cuts 1/2" holes Number of cuts per foot 20
12. If screen was installed: Length N/A ft. Diam in. Type
13. Method of construction Drilled
(drilled, dug, driven, bored, jetted, etc)
14. Date started 4/17/96
Month Day Year
15. Date completed 4/18/96
Month Day Year
16. Depth to water 177 ft. (If flowing well, so state)
17. Describe point from which depth measurements were made, and give sea-level elevation if available
Surface

18. If flowing well, state method of flow regulation: N/A

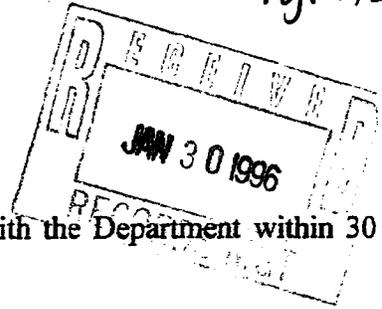
19. Remarks:

DO NOT WRITE IN THIS SPACE
OFFICE RECORD
Registration No. 55-553798
File No. AC(11-10)23ABA
Received By
Entered ENTERED MAY 20 1996

ARIZONA DEPARTMENT OF WATER RESOURCES

Operations Division
500 North 3rd Street
Phoenix, Arizona 85004

Pg. 1/2



WELL DRILLER REPORT

This report should be prepared by the driller in all detail and filed with the Department within 30 days following completion of the well.

- 1. Owner Name: Rick Harwood
Address: 1620 N. McLane, Payson, AZ 85541
Street City State Zip
- 2. Driller Name: Aero Drilling & Pumps, Inc.
Address: P.O. Box 499, Payson, AZ 85547
Street City State Zip
- 3. Location: 11N N/S 10E E/W 23 1/4 NE 1/4 NE 1/4 SE
Township Range Section 10-acre 40-acre 160-acre
- 4. Well Registration No. 55- ~~550603~~ 550693 (Required)
- 5. Permit No. N/A (If issued)

DESCRIPTION OF WELL

- 6. Total depth of hole 320 ft.
- 7. Type of casing Steel & PVC
- 8. Diameter and length of casing 6" stl in. from 0 to 21 4.5" PVC from 0 to 320
- 9. Method of sealing at reduction points Adapter
- 10. Perforated from 300 to 320, from to from to
- 11. Size of cuts 1/4" holes Number of cuts per foot 20
- 12. If screen was installed: Length N/A ft. Diam in. Type
- 13. Method of construction Drilled
(drilled, dug, driven, bored, jetted, etc)
- 14. Date started 1/20/96
Month Day Year
- 15. Date completed 1/23/96
Month Day Year
- 16. Depth to water 168 ft. (If flowing well, so state)
- 17. Describe point from which depth measurements were made, and give sea-level elevation if available
Surface
- 18. If flowing well, state method of flow regulation: N/A

19. Remarks: _____

DO NOT WRITE IN THIS SPACE
OFFICE RECORD

550693

Registration No. 55-550603

File No. A(11-10)23daa

Received _____ By _____

Entered **ENTERED JAN 30 1996**

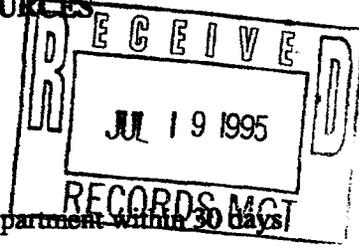
DWR-55-55-10/94 (Rev.)

Pg. 37/69

ARIZONA DEPARTMENT OF WATER RESOURCES

15 South 15th Avenue
Phoenix, Arizona 85007

WELL DRILLER REPORT



This report should be prepared by the driller in all detail and filed with the Department within 30 days following completion of the well.

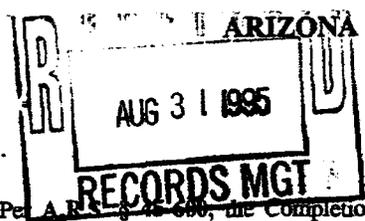
- 1. Owner Name: Lester Stevens
Address: HCR Box 588, Payson, AZ 85541
Street City State Zip
- 2. Driller Name: Aero Drilling & Pumps, Inc.
Address: P.O. Box 499, Payson, AZ 85547
Street City State Zip
- 3. Location: 11N N/S 10E E/W 22 SE 1/4 NE 1/4 NE 1/4
Township Range Section 10-acre 40-acre 160-acre
- 4. Well Registration No. 55- 544697 (Required)
- 5. Permit No. N/A (If issued)

DESCRIPTION OF WELL

- 6. Total depth of hole 420 ft.
- 7. Type of casing Steel
- 8. Diameter and length of casing 6 in. from 0 to 21, in from to .
- 9. Method of sealing at reduction points N/A
- 10. Perforated from None to , from to , from to .
- 11. Size of cuts N/A Number of cuts per foot
- 12. If screen was installed: Length N/A ft. Diam in. Type
- 13. Method of construction Drilled
(drilled, dug, driven, bored, jetted, etc)
- 14. Date started 7/12/95
Month Day Year
7/13/95
- 15. Date completed
Month Day Year
- 16. Depth to water 225 ft. (If flowing well, so state)
- 17. Describe point from which depth measurements were made, and give sea-level elevation if available
Surface
- 18. If flowing well, state method of flow regulation: N/A

19. Remarks:

DO NOT WRITE IN THIS SPACE
55-544697
A(11-10)22AAD
Rt
Fi **ENTERED JUL 20 1995**
Rt
En



ARIZONA DEPARTMENT OF WATER RESOURCES

500 North Third Street
Phoenix, Arizona 85004

Registration No. 55-544697
File No. A 11-10 22AAD

COMPLETION REPORT

1. Per A.R.S. § 45-1508, the Completion Report is to be filed with the Department within 30 days after installation of pump equipment by the registered well owner.
2. Drawdown of the water level for a non-flowing well should be measured in feet after not less than 4 hours of continuous operation and while still in operation and for a flowing well the shut-in pressure should be measured in feet above the land or in pounds per square inch at the land surface.
3. The static groundwater level should be measured in feet from the land surface immediately prior to the well capacity test.
4. The tested pumping capacity of the well in gallons per minute for a non-flowing well should be determined by measuring the discharge of the pump after continuous operation for at least 4 hours and for a flowing well by measuring the natural flow at the land surface.

LOCATION OF THE WELL:

11N N/S 10E E/W 22 Section 1/4 SE 1/4 1/4 1/4
Township Range 10-acre 40-acre 160-acre

EQUIPMENT INSTALLED:

Kind of pump Centrifugal
Turbine, centrifugal, etc.

Kind of power Electric H.P. Rating of Motor 1 1/2 HP
Electric, natural gas, gasoline, etc.

Pumping Capacity 9.1 Gal Date Pump Installed 08-18-1995

WELL TEST:

Test pumping capacity 5 Gal Per Minute Date Well Tested: 08-25-1995
Gallons per minute

Method of Discharge Measurement Orifice
Weir, orifice, current meter, etc.

Static Groundwater Level 197 FT ft. Drawdown 350 ft.

Total Pumping Lift 360 ft. Drawdown _____ lbs.
(Flowing Well)

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

08-28- , 19 95
Date

Lester G. Stevens
Print Well Owner's Name

Lester G. Stevens
Signature of Well Owner or Agent

HCR Box 588
Address

Payson Arizona 85541
City State Zip

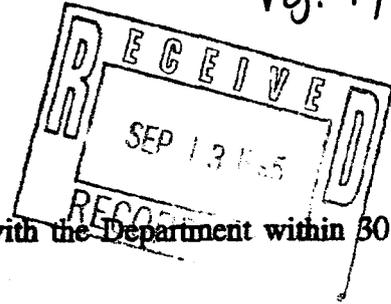
ENTERED SEP 7 1995

DWR-55-56-10/94 (Rev.)

ARIZONA DEPARTMENT OF WATER RESOURCES

Operations Division
500 North 3rd Street
Phoenix, Arizona 85004

Pg. 1/2



WELL DRILLER REPORT

This report should be prepared by the driller in all detail and filed with the Department within 30 days following completion of the well.

- 1. Owner Name: Lewis S. Robinett
Address: HCR Box 562-E, Payson, AZ 85541
Street City State Zip
- 2. Driller Name: Aero Drilling & Pumps, Inc.
Address: P.O. Box 499, Payson, AZ 85547
Street City State Zip
- 3. Location: 11N N/S 10E E/W 24 1/4 SW 1/4 SW 1/4 NW
Township Range Section 10-acre 40-acre 160-acre
- 4. Well Registration No. 55-548768 (Required)
- 5. Permit No. N/A (If issued)

DESCRIPTION OF WELL

- 6. Total depth of hole 380 ft.
- 7. Type of casing Steel & PVC
- 8. Diameter and length of casing 6" at 1 in. from 0 to 21 4.5" PVC in from 0 to 380
- 9. Method of sealing at reduction points Adapter
- 10. Perforated from 340 to 380 from _____ to _____ from _____ to _____
- 11. Size of cuts 3/4" holes Number of cuts per foot 20
- 12. If screen was installed: Length N/A ft. Diam _____ in. Type _____
- 13. Method of construction drilled
(drilled, dug, driven, bored, jetted, etc)
- 14. Date started 8/31/95
Month Day Year
- 15. Date completed 9/4/95
Month Day Year
- 16. Depth to water 174 ft. (If flowing well, so state)
- 17. Describe point from which depth measurements were made, and give sea-level elevation if available
Surface
- 18. If flowing well, state method of flow regulation: N/A

19. Remarks: _____

55-548768
A(11-10)24 BCC
ENTERED SEP 13 1995
By _____
Entered _____ By _____

DWR-55-55-10/94 (Rev.)

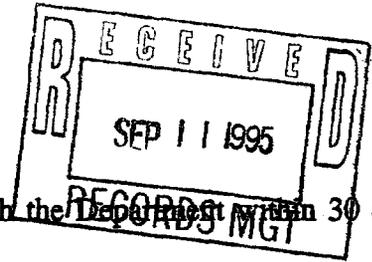
Pg. 41/69

ARIZONA DEPARTMENT OF WATER RESOURCES

Pg. 1/2

Operations Division
500 North 3rd Street
Phoenix, Arizona 85004

WELL DRILLER REPORT



This report should be prepared by the driller in all detail and filed with the Department within 30 days following completion of the well.

- 1. Owner Name: James & Betty Kucera
Address: HC 3 Box 518-K, Payson, AZ 85541
2. Driller Name: Aero Drilling & Pumps, Inc.
Address: P.O. Box 499, Payson, AZ 85547
3. Location: 11N N/S 10E E/W 23 1/4 SE 1/4 NE 1/4 SE
4. Well Registration No. 55-549961 (Required)
5. Permit No. N/A (If issued)

DESCRIPTION OF WELL

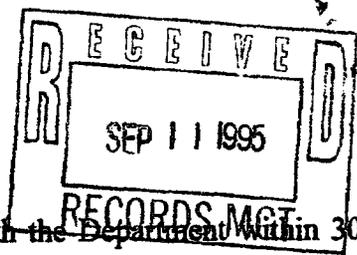
- 6. Total depth of hole 280 ft.
7. Type of casing Steel & PVC
8. Diameter and length of casing 6" st 1 in. from 0 to 21 .4.5" PVC in from 0 to 280
9. Method of sealing at reduction points Adapter
10. Perforated from 240 to 280 from to from to
11. Size of cuts 1/2" holes Number of cuts per foot 20
12. If screen was installed: Length N/A ft. Diam in. Type
13. Method of construction Drilled
14. Date started 8/13/95
15. Date completed 8/13/95
16. Depth to water 184 ft. (If flowing well, so state)
17. Describe point from which depth measurements were made, and give sea-level elevation if available Surface
18. If flowing well, state method of flow regulation: N/A

19. Remarks:

55-549961
A(11-10)23 DAD
Re ENTERED SEP 13 1995
Entered By

ARIZONA DEPARTMENT OF WATER RESOURCES

Operations Division
500 North 3rd Street
Phoenix, Arizona 85004



WELL DRILLER REPORT

This report should be prepared by the driller in all detail and filed with the Department within 30 days following completion of the well.

- 1. Owner Name: Leo Wasiak
Address: _____
Street City State Zip
- 2. Driller Name: Aero Drilling & Pumps, Inc.
Address: P.O. Box 499, Payson, AZ 85547
Street City State Zip
- 3. Location: 11N N/S 10E E/W 23 1/4 NE 1/4 SE 1/4 SE
Township Range Section 10-acre 40-acre 160-acre
- 4. Well Registration No. 55- 550467 (Required)
- 5. Permit No. N/A (If issued)

DESCRIPTION OF WELL

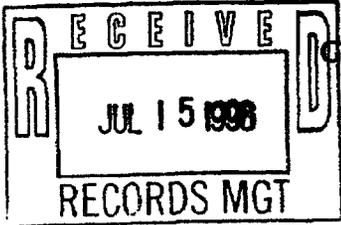
- 6. Total depth of hole 340 ft.
- 7. Type of casing Steel
- 8. Diameter and length of casing 6 in. from 0 to 21 in from _____ to _____
- 9. Method of sealing at reduction points N/A
- 10. Perforated from None to _____, from _____ to _____ from _____ to _____
- 11. Size of cuts N/A Number of cuts per foot _____
- 12. If screen was installed: Length N/A ft. Diam _____ in. Type _____
- 13. Method of construction Drilled
(drilled, dug, driven, bored, jetted, etc)
- 14. Date started 8/14/95
Month Day Year
- 15. Date completed 8/14/95
Month Day Year
- 16. Depth to water 185 ft. (If flowing well, so state)
- 17. Describe point from which depth measurements were made, and give sea-level elevation if available
Surface
- 18. If flowing well, state method of flow regulation: N/A

19. Remarks: _____

DO NOT WRITE IN THIS SPACE
OFFICE RECORD

55-550467

Reg AC11-1023DDA _____
File _____
Rec ENTERED SEP 13 1995 _____
Ent. _____



STATE OF ARIZONA
DEPARTMENT OF WATER RESOURCES
GROUNDWATER MANAGEMENT SUPPORT SECTION
500 North Third Street, Phoenix, Arizona 85004-3903
Phone (602) 417-2470 Fax: (602) 417-2422

COMPLETION REPORT
(Pump Installation Report)

1. Per A.R.S. § 45-600, The completion report is to be filed with the Department within 30 days after installation of pump equipment by the registered well owner.
2. Drawdown of the water level for a non-flowing well should be measured in feet after not less than 4 hours of continuous operation. For a flowing well the shut-in pressure should be measured in feet above the land or in pounds per square inch at the land surface.
3. The static groundwater level should be measured in feet from the land surface immediately prior to the well capacity test.
4. The tested pumping capacity of the well in gallons per minute for a non-flowing well should be determined by measuring the discharge of the pump after continuous operation for at least 4 hours and for a flowing well by measuring the natural flow at the land surface.

REGISTRATION NO: 55-550467

FILE NO: ALI-10)23 dda

LOCATION OF THE WELL:

<u>11N</u>	<u>10E</u>	<u>23</u>	<u>1/4 NE</u>	<u>1/4 SE</u>	<u>1/4 SE</u>
Township	Range	Section	10-acre	40-acre	160-acre

EQUIPMENT INSTALLED:

Kind of Pump SUBMERSIBLE Kind of Power ELECTRIC
 (Turbine, Submersible, Centrifugal, etc.) (Electric, Natural Gas, Gasoline, etc.)

H.P. Rating of Motor 3/4 Pumping Capacity 5 GPM Date Pump Installed 6-15-96

WELL TEST:

Test Pumping Capacity 5 Date Well Tested 6-15-96
 (Gallons per minute)

Method of Discharge Measurement BUCKET & STOP WATCH
 (Weir, orifice, current meter, bucket, etc.)

Static Groundwater Level 185 ft. Drawdown 115 ft.

Total Pumping Lift 300 ft. Drawdown N/A lbs.
 (Flowing Well)

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

Leopold Wasiak HC3 Box 518C Payson AZ 85541-9410
 Print Well Owner's Name Address City State Zip

Leopold Wasiak 520-474 5256 7-9-96
 Signature of Well Owner Phone Number Date

ENTERED JUL 19 1996

ARIZONA DEPARTMENT OF WATER RESOURCES

15 South 15th Avenue
Phoenix, Arizona 85007



WELL DRILLER REPORT

This report should be prepared by the driller in all detail and filed with the Department within 30 days following completion of the well.

1. Owner Name: Richard Falkenberg
Address: P.O. Box 58, Payson, AZ 85547
Street City State Zip

2. Driller Name: Aero Drilling & Pumps, Inc.
Address: P.O. Box 499, Payson, AZ 85547
Street City State Zip

3. Location: 11N N/S 10E E/W 23 SW 1/4 SE 1/4 NE 1/4
Township Range Section 10-acre 40-acre 160-acre

4. Well Registration No. 55-545800 (Required)

5. Permit No. N/A (If issued)

DESCRIPTION OF WELL

6. Total depth of hole 340 ft.

7. Type of casing Steel & PVC

8. Diameter and length of casing 6" stl in. from 0 to 21, 4.5" PVC in from 0 to 340

9. Method of sealing at reduction points Adapter

10. Perforated from 300 to 340, from to, from to

11. Size of cuts 1/2" holes Number of cuts per foot 20

12. If screen was installed: Length N/A ft. Diam in. Type

13. Method of construction Drilled
(drilled, dug, driven, bored, jetted, etc)

14. Date started 8/9/95
Month Day Year

15. Date completed 8/10/95
Month Day Year

16. Depth to water 177 ft. (If flowing well, so state)

17. Describe point from which depth measurements were made, and give sea-level elevation if available
Surface

18. If flowing well, state method of flow regulation: N/A

19. Remarks:

DO NOT WRITE IN THIS SPACE
55-545800
A(11-10)23ADC
Regis
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Enten
ENTERED SEP 11 1995

AZ DEPARTMENT OF WATER RESOURCES

WELL REGISTRY REPORT - WELLS55

Location A 11.0 10.0 23 D B D Well Reg.No 55 - 550467 AMA NOT WITHIN ANY AMA OR INA

Registered Name DONALD & CATHERINE A. ROBERTS P. O BOX 2357 PAYSON AZ 85547

File Type NEW WELLS (INTENTS OR APPLICATIONS) Application/Issue Date 06/23/1995

Owner OWNER Driller No. 108 Driller Name AERO DRILLING AND PUMPS, INC. Driller Phone 928-474-2376 County GILA Parcel No. 302-34-001N Intended Capacity GPM 15.00

Well Type EXEMPT SubBasin TONTO CREEK Watershed SALT RIVER Registered Water Uses DOMESTIC Registered Well Uses WATER PRODUCTION Discharge Method BUCKET - BARREL - STOPWATCH Power ELECTRIC MOTOR < 1 HP

Well Depth 340.00 Case Diam 6.00 Tested Cap 5.00 Pump Cap. 5.00 Case Depth 0.00 CRT X Draw Down 115.00 Water Level 185.00 Log X Acres Irrig 0.00 Finish STEEL - PERFORATED OR SLOTTED CASING

Contamination Site: NO - NOT IN ANY WQARF SITE

Tribe: Not in a tribal zone

Comments 3543 N. Houston Mesa Rd., Payson, AZ 85541 Revised legal per ADWR GIS parcel map, 10/4/13 - bew

Places Of Use

A 11 0 10 0 23 D B D

Current Action

10/8/2013 555 DRILLER & OWNER PACKETS MAILED Action Comment: bew

Action History

10/4/2013 855 CHANGE OF WELL LEGAL DESCRIPTION Action Comment: OLD LEGAL DESC: A(11.0-10.0) 23 DDB
10/4/2013 550 DRILLING AUTHORITY ISSUED Action Comment: bew
10/2/2013 160 NOI RECEIVED FOR DEEPENING A WELL Action Comment: bew
10/1/2013 210 COUNTY HEALTH AUTHORITY ENDORSED Action Comment: bew
9/4/2013 860 CHANGE OF WELL OWNERSHIP Action Comment: gt
3/24/2011 860 CHANGE OF WELL OWNERSHIP Action Comment: bew
8/14/1995 805 PUMP INSTALLATION COMPLETION REPORT RECEIVED Action Comment:
8/14/1995 755 WELL CONSTRUCTION COMPLETED Action Comment:
8/14/1995 750 WELL DRILLER REPORT AND WELL LOG RECEIVED Action Comment:

ARIZONA DEPARTMENT OF WATER RESOURCES
DEPARTMENT OF WR 15 South 15th Avenue
Phoenix, Arizona 85007

JUN 2 - 1994

OPERATIONS DIV. WELL DRILLER REPORT

This report should be prepared by the driller in all detail and filed with the Department within 30 days following completion of the well.

- 1. Owner Name: Dennis Jackson
Address: HCR 579-A, Payson, AZ 85541
Street City State Zip
- 2. Driller Name: Aero Drilling & Pumps, Inc.
Address: P.O. Box 499, Payson, AZ 85547
Street City State Zip
- 3. Location: 11N N/S 10E E/W 23 NW 1/4 NE 1/4 NE 1/4
Township Range Section 10-acre 40-acre 160-acre
- 4. Well Registration No. 55-540604 (Required)
- 5. Permit No. N/A (If issued)

DESCRIPTION OF WELL

- 6. Total depth of hole 240 ft.
- 7. Type of casing Steel & PVC
- 8. Diameter and length of casing 6" st 1 in. from 0 to 20, 4.5" PVC in from 0 to 240.
- 9. Method of sealing at reduction points Adapter
- 10. Perforated from 200 to 240, from _____ to _____, from _____ to _____.
- 11. Size of cuts 1/2" holes Number of cuts per foot 20
- 12. If screen was installed: Length N/A ft. Diam _____ in. Type _____
- 13. Method of construction Drilled
(drilled, dug, driven, bored, jetted, etc)
- 14. Date started 5/11/94
Month Day Year
- 15. Date completed 5/13/94
Month Day Year
- 16. Depth to water 180 ft. (If flowing well, so state)
- 17. Describe point from which depth measurements were made, and give sea-level elevation if available
Surface
- 18. If flowing well, state method of flow regulation: N/A ENTERED JUN 3 1994
- 19. Remarks: _____

DO NOT WRITE IN THIS SPACE

55-540604
A(11-10)23AAB

Re _____
Fil _____
Re _____
Ent _____

DWR-55-55-7/91 (Rev.)

ARIZONA DEPARTMENT OF WATER RESOURCES

Pg. 1/3

DEPARTMENT OF WR

15 South 15th Avenue
Phoenix, Arizona 85007

Registration No. 55-540136

MAR 9 - 1994

File No. A(11-10)23 ADB

OPERATIONS DIV.

COMPLETION REPORT

1. Per A.R.S. § 45-600, the Completion Report is to be filed with the Department within 30 days after installation of pump equipment by the registered well owner.
2. Drawdown of the water level for a non-flowing well should be measured in feet after not less than 4 hours of continuous operation and while still in operation and for a flowing well the shut-in pressure should be measured in feet above the land or in pounds per square inch at the land surface.
3. The static groundwater level should be measured in feet from the land surface immediately prior to the well capacity test.
4. The tested pumping capacity of the well in gallons per minute for a non-flowing well should be determined by measuring the discharge of the pump after continuous operation for at least 4 hours and for a flowing well by measuring the natural flow at the land surface.

LOCATION OF THE WELL:

11N N/S Township 10E E/W Range 23 Section NE 1/4 10-acre SE 1/4 40-acre NE 1/4 160-acre

EQUIPMENT INSTALLED:

Kind of pump SUBMERSIBLE
Turbine, centrifugal, etc.

Kind of power ELECTRIC H.P. Rating of Motor 1/2
Electric, natural gas, gasoline, etc.

Pumping Capacity 5 Gallons per minute Date pump installed: 2-15-94

WELL TEST:

Test pumping capacity 5 Gallons per minute Date Well Tested: 2-15-94

Method of Discharge Measurement BUCKET & STOPWATCH
Weir, orifice, current meter, etc.

Static Groundwater Level 185 ft. Drawdown 35 ft.

Total Pumping Lift 220 ft. Drawdown N/A lbs.
(Flowing Well)

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

3-7- 1994
Date

GEORGE W. DAWSON
Print Well Owner's Name

George W. Dawson
Signature of Well Owner or Agent

1029 E. MARIPOSA
Address

Phx AZ 85014
City State Zip

ENTERED MAR 09 1994

Run Date: 01/25/2012

AZ DEPARTMENT OF WATER RESOURCES
WELL REGISTRY REPORT - WELLS55

Location A 11.0 10.0 23 A D B Well Reg.No 55 - 540136 AMA NOT WITHIN ANY AMA OR INA

Registered Name SVANHILDUR JAFETSDOTTIR 206 S. KODZ File Type NEW WELLS (INTENTS OR APPLICATIONS) Application/Issue Date 08/03/1993

PAYSON AZ 85541

Owner OWNER
Driller No. 108
Driller Name AERO DRILLING AND PUMPS, INC.
Driller Phone 928-474-2376
County GILA
Parcel No. 302-34-497A
Intended Capacity GPM 12.00

Well Type EXEMPT
SubBasin VERDE CANYON
Watershed VERDE RIVER
Registered Water Uses DOMESTIC
Registered Well Uses WATER PRODUCTION
Discharge Method BUCKET - BARREL - STOPWATCH
Power ELECTRIC MOTOR < 1 HP

Well Depth 260.00 Case Diam 6.00 Tested Cap 5.00
Pump Cap. 5.00 Case Depth 260.00 CRT X
Draw Down 35.00 Water Level 170.00 Log X
Acres Irrig 0.00 Finish STEEL - PERFORATED OR SLOTTED CASING

Contamination Site: NO - NOT IN ANY WQARF SITE

Tribe: Not in a tribal zone

Comments Well located at 8166 W. Sepia, Payson

Places Of Use

A 11 0 10 0 23 A D B

Current Action

1/23/2012 860 CHANGE OF WELL OWNERSHIP
Action Comment: pwc

Action History

9/27/1993 750 WELL LOG RECEIVED
Action Comment:
9/27/1993 805 COMPLETION REPORT RECEIVED
Action Comment:
9/27/1993 755 WELL CONSTRUCTION COMPLETED
Action Comment:

ARIZONA DEPARTMENT OF WATER RESOURCES

15 South 15th Avenue
Phoenix, Arizona 85007

Registration No. 55-539625

File No. A(11-10) 23 a a b

COMPLETION REPORT

1. Per A.R.S. § 45-600, the Completion Report is to be filed with the Department within 30 days after installation of pump equipment by the registered well owner.
2. Drawdown of the water level for a non-flowing well should be measured in feet after not less than 4 hours of continuous operation and while still in operation and for a flowing well the shut-in pressure should be measured in feet above the land or in pounds per square inch at the land surface.
3. The static groundwater level should be measured in feet from the land surface immediately prior to the well capacity test.
4. The tested pumping capacity of the well in gallons per minute for a non-flowing well should be determined by measuring the discharge of the pump after continuous operation for at least 4 hours and for a flowing well by measuring the natural flow at the land surface.

LOCATION OF THE WELL:

11N N/S Township 10E E/W Range 23 Section NW 1/4 10-acre NE 1/4 40-acre NE 1/4 160-acre

EQUIPMENT INSTALLED:

Kind of pump 4" Submergible Turbine, centrifugal, etc. OCT -

Kind of power Electric Electric, natural gas, gasoline, etc. H.P. Rating of Motor 1 HP

Pumping Capacity 8 Gal. Per. Min. Gallons per minute Date pump installed: 8-26-93

WELL TEST:

Test pumping capacity 3 1/2 Gal. P/M Gallons per minute Date Well Tested: 9-23-93

Method of Discharge Measurement Bucket & Stop Watch Weir, orifice, current meter, etc.

Static Groundwater Level 155' ft. Drawdown 118 ft. ft.

Total Pumping Lift 273 ft. ft. Drawdown ~~118 ft.~~ N/A lbs. (Flowing Well)

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

A.K. Dr. Norma Fallers
Print Well Owner's Name Norma Fallers

10-1- _____, 1993
Date

A.K. Fallers
Signature of Well Owner or Agent



573-G
Address

Payson Az. 85541
City State Zip

ARIZONA DEPARTMENT OF WATER RESOURCES
15 South 15th Avenue
Phoenix, Arizona 85007

Pg. 1/3

WELL DRILLER REPORT

This report should be prepared by the driller in all detail and filed with the Department within 30 days following completion of the well.

1. Owner Name: Gordon Cotta
 Address: HC 3 Box 573, Payson, AZ 85541
 Street City State Zip
2. Driller Name: Aero Drilling & Pumps, Inc.
 Address: P.O. Box 499, Payson, AZ 85547
 Street City State Zip
3. Location: 11N N/S 10E E/W 23 NW 1/4 NE 1/4 NE 1/4
 Township Range Section 10-acre 40-acre 160-acre
4. Well Registration No. 55- 539488 (Required)
5. Permit No. N/A (If issued)

DESCRIPTION OF WELL

6. Total depth of hole 240 ft.
7. Type of casing Steel & PVC
8. Diameter and length of casing 6" stl. in. from 0 to 21, 4.5" PVC in from 0 to 240.
9. Method of sealing at reduction points Adapter
10. Perforated from 200 to 240, from _____ to _____, from _____ to _____.
11. Size of cuts 1/4" holes Number of cuts per foot 20
12. If screen was installed: Length N/A ft. Diam _____ in. Type _____
13. Method of construction Drilled
 (drilled, dug, driven, bored, jetted, etc)
14. Date started 6/17/93
 Month Day Year
15. Date completed 6/18/93
 Month Day Year
16. Depth to water 165 ft. (If flowing well, so state)
17. Describe point from which depth measurements were made, and give sea-level elevation if available
Surface
18. If flowing well, state method of flow regulation: N/A
19. Remarks: _____

DO NOT WRITE IN THIS SPACE
 OFFICE RECORD

Registration No. 55-539488
 File No. A (11-10) 23aab
 Received _____ By _____
 Entered ENTERED JUL 01 1993

DWR-55-55-7/91 (Rev.)

ARIZONA DEPARTMENT OF WATER RESOURCES

15 South 15th Avenue
Phoenix, Arizona 85007

Registration No. 55-539488

File No. AC(11-10)23 AAB

COMPLETION REPORT

1. Per A.R.S. § 45-600, the Completion Report is to be filed with the Department within 30 days after installation of pump equipment by the registered well owner.
2. Drawdown of the water level for a non-flowing well should be measured in feet after not less than 4 hours of continuous operation and while still in operation and for a flowing well the shut-in pressure should be measured in feet above the land or in pounds per square inch at the land surface.
3. The static groundwater level should be measured in feet from the land surface immediately prior to the well capacity test.
4. The tested pumping capacity of the well in gallons per minute for a non-flowing well should be determined by measuring the discharge of the pump after continuous operation for at least 4 hours and for a flowing well by measuring the natural flow at the land surface.

LOCATION OF THE WELL:

11 N/NS Township 10 E/W Range 23 Section NW 1/4 10-acre NE 1/4 40-acre NE 1/4 160-acre

EQUIPMENT INSTALLED:

Kind of pump SUBMERSIBLE
 Turbine, centrifugal, etc.

Kind of power ELECTRIC H.P. Rating of Motor 1
 Electric, natural gas, gasoline, etc.

Pumping Capacity 12 GPM Date pump installed: 6-23-93
 Gallons per minute

WELL TEST:

Test pumping capacity 12 Date Well Tested: 6-23-93
 Gallons per minute

Method of Discharge Measurement BUCKET & STOPWATCH
 Weir, orifice, current meter, etc.

Static Groundwater Level 156' ft. Drawdown 22' ft.

Total Pumping Lift 178' ft. Drawdown N/A lbs.
 (Flowing Well)

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

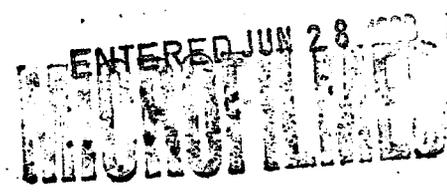
6-23, 1993
 Date

GARDON L. COTTA
 Print Well Owner's Name

Gardon L. Cotta
 Signature of Well Owner or Agent

HCR Box 573
 Address

Payson, Ariz. 85541
 City State Zip



ARIZONA DEPARTMENT OF WATER RESOURCES

15 South 15th Avenue
Phoenix, Arizona 85007

Pg. 1/2

WELL DRILLER REPORT

This report should be prepared by the driller in all detail and filed with the Department within 30 days following completion of the well.

- 1. Owner Name: Graham & Jean Hill
Address: HC 3 Box 573-E, Payson, AZ 85541
Street City State Zip
- 2. Driller Name: Aero Drilling & Pumps, Inc.
Address: P.O. Box 499, Payson, AZ 85547
Street City State Zip
- 3. Location: 11N N/S 10E E/W 23 SW 1/4 NE 1/4 NE 1/4
Township Range Section 10-acre 40-acre 160-acre
- 4. Well Registration No. 55- 539490 (Required)
- 5. Permit No. N/A (If issued)

DESCRIPTION OF WELL

- 6. Total depth of hole 260 ft.
- 7. Type of casing Steel
- 8. Diameter and length of casing 6 in. from 0 to 21, _____ in from _____ to _____.
- 9. Method of sealing at reduction points N/A
- 10. Perforated from None to _____, from _____ to _____, from _____ to _____.
- 11. Size of cuts N/A Number of cuts per foot _____
- 12. If screen was installed: Length N/A ft. Diam _____ in. Type _____
- 13. Method of construction Drilled
(drilled, dug, driven, bored, jetted, etc)
- 14. Date started 6/22/93
Month Day Year
- 15. Date completed 6/23/93
Month Day Year
- 16. Depth to water 167 ft. (If flowing well, so state)
- 17. Describe point from which depth measurements were made, and give sea-level elevation if available
Surface
- 18. If flowing well, state method of flow regulation: N/A
- 19. Remarks: _____

DO NOT WRITE IN THIS SPACE
OFFICE RECORD

Registration No. 55-539490
File No. A (11-10) 23aac
Received _____ By _____
Entered ENTERED!!! 2 6 1993

DWR-55-55-791 (Rev.)

Pg. 64/69

ARIZONA DEPARTMENT OF WATER RESOURCES

15 South 15th Avenue
Phoenix, Arizona 85007

Registration No. 55-531101

File No. A (11-10)23adc

7 1991

COMPLETION REPORT

1. Per A.R.S. § 45-600, the Completion Report is to be filed with the Department within 30 days after installation of pump equipment by the registered well owner.
2. Drawdown of the water level for a non-flowing well should be measured in feet after not less than 4 hours of continuous operation and while still in operation and for a flowing well the shut-in pressure should be measured in feet above the land or in pounds per square inch at the land surface.
3. The static groundwater level should be measured in feet from the land surface immediately prior to the well capacity test.
4. The tested pumping capacity of the well in gallons per minute for a non-flowing well should be determined by measuring the discharge of the pump after continuous operation for at least 4 hours and for a flowing well by measuring the natural flow at the land surface.

LOCATION OF THE WELL:

11 N1/4 10 E1/4 23 SW 1/4 3E 1/4 NE 1/4
 Township Range Section 10-acre 40-acre 160-acre

EQUIPMENT INSTALLED:

Kind of pump Submersible
 Turbine, centrifugal, etc.
 Kind of power Electric H.P. Rating of Motor 3hp
 Electric, natural gas, gasoline, etc.
 Pumping Capacity 18 Date pump installed: May 23, 1991
 Gallons per minute

WELL TEST:

Test pumping capacity 18 Date Well Tested: May 24 to May 28
 Gallons per minute
 Method of Discharge Measurement Rock well meter 1"
 Weir, orifice, current meter, etc.

Static Groundwater Level 154' ft. Drawdown 380' ft.

Total Pumping Lift 0 ft. Drawdown _____ lbs.
(Flowing Well)

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

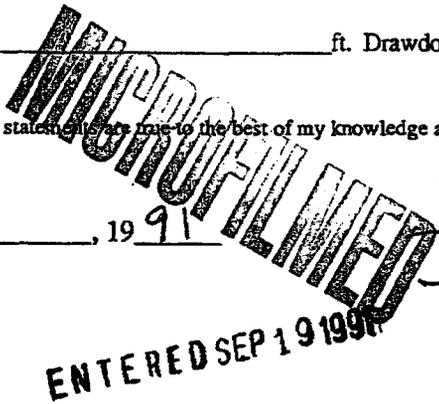
September 16, 1991
Date

United Utilities
Print Well Owner's Name

Dean Shalh Superintendent
Signature of Well Owner or Agent

PO Box 2890
Address

PAVSON AZ. 85547
City State Zip



STATE OF ARIZONA
DEPARTMENT OF WATER RESOURCES
15 South 15th Avenue
Phoenix, Arizona 85007

Pg. 2/2

JUN 19 1991

WELL DRILLER REPORT

This report should be prepared by the driller in all detail and filed with the Department within 30 days following completion of the well.

1. Owner United Utilities
Name
P.O. Box 1586, Payson, AZ 85547
Mailing Address

2. Driller Aero Drilling & Pumps, Inc.
Name
P.O. Box 499, Payson, AZ 85547
Mailing Address

3. Location of well: T11N, R10E, Sec.23, SW $\frac{1}{4}$, SE $\frac{1}{4}$, NE $\frac{1}{4}$.

4. Permit No. N/A
(If issued)

DESCRIPTION OF WELL

5. Total depth of hole 400 ft.

6. Type of casing Steel & PVC

7. Diameter and length of casing 6" stl in. from 0 to 42, 4 $\frac{1}{2}$ " PVC from 0 to 400.

8. Method of sealing at reduction points Adapter

9. Perforated from 200 to 220, from 360 to 400, from _____ to _____.

10. Size of cuts $\frac{1}{4}$ " holes number of cuts per foot 20

11. If screen was installed: Length N/A ft. Diam _____ in. Type _____

12. Method of construction Drilled
drilled, dug, driven, bored, jetted, etc

13. Date started 5/16/91
Month Day Year

14. Date completed 5/18/91
Month Day Year

15. Depth to water 177 ft. (If flowing well, so state)

16. Describe point from which depth measurements were made, and give sea-level elevation if available Surface

17. If flowing well, state method of flow regulation: N/A

18. Remarks: Installed pump.

MICROFILMED

DO NOT WRITE IN THIS SPACE OFFICE RECORD	
REG. No.	<u>55-531101</u>
File No.	<u>A(11-10)23 ADC</u>
Entered	<u>ENTERED JUN 20 1991</u>

Exhibit KMR-H

Brooke Utilities, Inc.

P. O. Box 82218 • Bakersfield, California 93380-2218
Customer Call Center - P.O. Box 9005 • San Dimas, California 91773-9016 • (800) 270-6084



ROBERT T. HARDCASTLE
(661) 633-7526
Fax (781) 823-3070
RTH@brook UTILITIES.COM

April 7, 2008

VIA ELECTRONIC MAIL
AND REGULAR U.S. MAIL

Buzz Walker
Town of Payson
303 North Beeline Highway
Payson, AZ 85541

2 copies @ 50¢ = \$1.00

Re: Supplemental water Supplies from C.C. Cragin Reservoir

Dear Buzz,

Thank you for your meeting time recently with myself and Ms. Brogdon on April 2 to discuss participating in supplemental water supplies for our various Payson Water Co. water systems from the Town of Payson's planned pipeline from the C.C. Cragin Reservoir.

Without reservation I can assure you that Brooke Utilities, Inc. and our various water company subsidiaries are interested in discussing our participation in the pipeline water supply project at an appropriate future date. Please keep us advised of your progress in this matter including any exploratory meetings that may be scheduled.

Thanks, as always, for your cooperation.

Sincerely,

Robert T. Hardcastle
President

cc: RTH correspondence file
Joy Higgins, Rep.
MB

Brooke Water LLC, Circle City Water Co. LLC, Strawberry Water Co., Inc., Pine Water Co., Inc.,
Payson Water Co., Inc., Navajo Water Co., Inc., Tonto Basin Water Co., Inc.