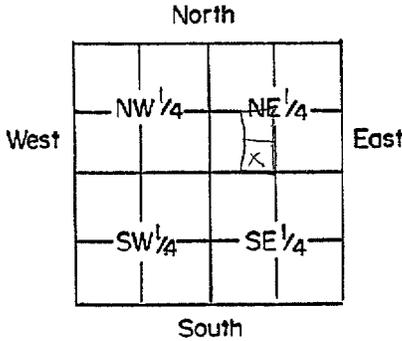


XEMPT WELL *
ILINC FEE: \$3.00

DEPARTMENT OF WATER RESOURCES
NOTICE OF INTENTION TO DRILL OR DEEPEN
AN EXEMPT WELL

EXEMPT WELL

Section 45-596, Arizona Revised Statutes, provides A person may not drill or cause to be drilled any well or deepen or replace an existing well without first filing a Notice of Intention to Drill with the Department on a form prescribed and furnished by the Department The well shall be completed within one year after the date of Notice An exempt well means a well having a pump with maximum design capacity of not more than 35 gallons per minute which is used to withdraw groundwater An exempt well may include the non-commercial irrigation of not more than 1 acre of land



- Indicate Well Location by X
(Above diagram represents one
640 acre section)

DESCRIPTION OF WELL

8. Diameter 6"
Depth 300'-400'

9. Type of Casing
Steel

10. Principal use of Water.
Domestic + Stock

11 Other uses Intended

PLACE OF USE

13. Township 1N

14. Range 1E

15. Section _____

16. Legal description of land
water is to be used on

SAME

17. Design Pump Capacity

35 gpm / max

18. Action Requested

Drill X
Deepen _____
Replace _____

19 This notice filed by

Owner X
Lessee X
Driller _____

WELL/LAND LOCATION

1. Township 1N

2 Range 1E

3 Section 35

4 SE 1/4 SW 1/4 NE 1/4
10 acre sub-division

5 County Maricopa

(If for non-commercial irrigation,
state approximate area being cultivated.)

12 Construction will start
about
4 / 81
Month Year

SAME
Name

Address
LAVERNE AZ 85339
City State Zip

6. Owner of Well

Ruth E. Wooten Kenick Inc.
Name

Rt 1, Box 56D
Address
Tolleson AZ 85353
City State Zip

DO NOT WRITE IN THIS SPACE
OFFICE RECORD
FILE NO A(1-1)35 acd
FILED 4-20-81 BY J
INPUT 4 21-81 BY Pat
DUPLICATE MAILED 4-21-81 BY pl
REGISTRATION NO 55-87542
NON EXPANSION AREA Phoenix

20. Drillers Name
ARIZONA Well Drilling
Name

Rt 1 Box 583
Address
LAVERNE AZ 85339
City State Zip

#40312 T-17
Department License Number

7. Owner of Land

Robert + Peggy Wooten
Name

Rt 1, Box 56D
Address
Tolleson AZ 85353
City State Zip

1 Fill out this form in duplicate and mail to P O. Box 2600, Phoenix, Arizona, 85002, or deliver to 99 East Virginia, Suite 100, Phoenix, Arizona 85004.

2 If the Exempt Well is in fact a replacement (or deepening) well, state the registration number of the existing well.

3 Construction standards for new and replacement wells and the deepening and abandonment of existing wells, shall be in accordance with Department Rules and Regulations.

I, Ruth E. Wooten Guth, state that the construction will be under the direct and personal supervision of the well driller designated on this form and that the designated driller holds a contractors license pursuant to ARS 45-595

4-20-81
Date

Ruth E. Wooten Guth
Signature of Person Filing

DEPARTMENT OF WATER RESOURCES
99 East Virginia - Suite 100
Phoenix, Arizona 85004

Registration No. 55-87542
Owner of
Well Site Ruth E Wootten Kennels
File No. A(1-1)35ackD

COMPLETION REPORT

1. A Completion Report is to be filed with the Department within 30 days after installation of pump equipment.
2. 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 four hours and for a flowing well by measuring the natural flow at the land surface.
3. Drawdown of the water level for a non-flowing well should be measured in feet after not less than four hours of continuous operation and while still in operation and for a flowing well the shutin pressure should be measured in feet above the land or in pounds per square inch at the land surface.
4. The static groundwater level should be measured in feet from the surface immediately prior to the well capacity test.

LOCATION OF THE WELL

Laveen
Date well completed 6-26-81 Depth of well 390

1. Well Test

Test pumping capacity 20 Date well tested 6-26-81
(Gallons per minute)

Method of discharge measurement weir
(Weir, orifice, current meter, et cetera)

Static groundwater level 160 Feet drawdown 18 feet

Total pumping lift 160 Feet drawdown _____ pounds
(flowing well)

2. Equipment Installed

Kind of pump cent.
(Turbine, centrifugal, et cetera)

Kind of power elect. Horse power rating of motor 1 hp
(Electric, natural gas, et cetera)

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

Vernon J Weeks
Signature

RT 1 Box 583
Address

Date 6-28, 19 81

Laveen AZ 85334
City State ZIP

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 Wooten Name _____
Jameer Address _____

2 Lessee or Operator _____ Name _____
Address _____

3 Driller Arizona Well Drilling Name _____
PO Box 583 Address Jameer

4 Location of well Jameer

5 Permit No 55-87542
(if issued)

DESCRIPTION OF WELL

6 Total depth of hole 390 ft

7 Type of Casing Steel

8 Diameter and length of casing 8 in from 0 to 390, _____ in from _____ to _____

9 Method of sealing at reduction points Welded

10 Perforated from _____ to _____, from _____ to _____, from _____ to _____

11 Size of cuts _____ Number of cuts per foot _____

12 If screen was installed Length _____ ft Diam _____ in Type _____

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

14 Date started 5 6 81
Month day year

15 Date completed 5 26 81
Month day year

16 Depth to water 66 ft (If flowing well, so state)

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

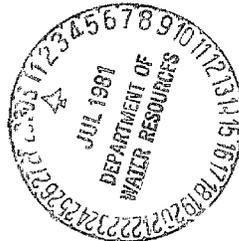
18 If flowing well, state method of flow regulation

19 REMARKS _____

DO NOT WRITE IN THIS SPACE	
OFFICE RECORD	
Registration No	<u>55-87542</u>
Received	By _____
Entered	<u>8-3-81</u> By _____
File No	<u>A(1-1)35acd</u>

(Well log to appear on Reverse side)

RECEIVED



LOG OF WELL

Indicate depth at which water was first encountered, and the depth and thickness of water bearing beds. If water is artesian indicate depth at which encountered, and depth to which it rose in well.

FROM (FEET)	TO (FEET)	DESCRIPTION OF FORMATION MATERIAL
0	50	packed sand
50	60	gravel
60	80	Sandy clay - gravel
80	100	sand
100	120	clay
120	130	gravel
130	140	sand
140	160	sand
160	170	clay
170	180	sand & gravel
180	200	sand
200	220	sand
220	230	sandy gravel
230	240	clay
240	250	sandy clay
250	270	sand
270	290	sand & gravel
290	300	clay
300	320	sand
320	340	sand & gravel
340	350	clay
350	390	sand & gravel

I hereby certify that this well was drilled by me (or under my supervision), and that each and all of the statements herein contained are true to the best of my knowledge and belief.

Driller Vernon J. Wells
Name
 RT 1 Box 54 Lover
Address
 Date 6-2 81

Ruth E. Wooten Kennels, Inc.
 Pt. 1 Box 76-D
 Tolleson, AZ 35353

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

RECEIPT -- FILE

No 8275

KIND ENTRY	FILE REFERENCE NO
55	87542
	THRU

ACCOUNT NO			INT ACCT	ITEM DESCRIPTION	RATE	\$ AMOUNT
AGENCY	CHAPTER	DIV				
				Filing fee for Notice of Intention to Drill or Deepen an Exempt Well		3.00
				File #A(1-1,35 acd		
				Registration #55-87542		
				Check #3048		
					WAITER PAYMENT	
					GUESTS	1
					CHK NO	3048
					55-1	3.00
					TAX	0.00
					TOTL	3.00
					GEN.CHEK	3.00
					# 97 A	16:35

04-17-91

TOTAL

\$ 3.00