



**Arizona Department of Water Resources**  
P.O. Box 36020 Phoenix, Arizona 85067-6020  
(602) 771-8527 - [www.azwater.gov](http://www.azwater.gov)

## Receipt For Request to Change Well Ownership

Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104

**Keep this for your records**

WELL REGISTRATION NUMBER  
**55-085584**

Pursuant to Arizona Revised Statutes (A.R.S.) 45-593(C), the person to whom a well is registered must notify Arizona Department of Water Resources of Water Resources (ADWR) of a change in ownership of the well and the new owner must furnish information as required by ADWR to keep its well registration records current and accurate.

**FEE \$30.00 per WELL**

### SECTION 1. Well Location

#### Location of Well

|                |             |         |          |         |         |      |     |        |
|----------------|-------------|---------|----------|---------|---------|------|-----|--------|
| TOWNSHIP (N/S) | RANGE (E/W) | SECTION | 160 ACRE | 40 ACRE | 10 ACRE | BOOK | MAP | PARCEL |
| 7N             | 3E          | 19      | SW       | NE      | SW      | 202  | 25  | 012    |

### SECTION 2. Statement of Change of Well Ownership

#### New Well Owner

FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL

**MCDOWELL PEAK HOLDINGS, LLC**

MAILING ADDRESS

**10115 E BELL RD STE 107 PMB 256**

CITY / STATE / ZIP

**SCOTTSDALE, AZ 85260-**

CONTACT PERSON NAME AND TITLE

TELEPHONE NUMBER

**(480) 203-3605**

FAX

WELL ADDRESS

WELL CITY

MAJOR CROSS ROADS

EMAIL

### SECTION 3. Optional by Property Owner and Well Owner Only

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

### SECTION 4. Well Owner Signature

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

PREPARED BY

**E RUNBERG**

DATE

**10/6/2016**

### PAYMENT INFORMATION

|                  |           |
|------------------|-----------|
| <b>Reference</b> | DWR-6233  |
| <b>Amount</b>    | \$30.00   |
| <b>Date</b>      | 10/6/2016 |

A *Request to Change Well Information Form* must be filed if there has been a change in the recorded information on a well already in existence. This may include more accurate information on the location of the well, more accurate information on the well construction details for the well, a change in the place of use or purpose of use of the water withdrawn from the well or a change in the county tax assessor's parcel identification number for the land where the well is located. It is the responsibility of the well owner to submit this information to ADWR. Forms may be obtained at the Arizona Department of Water Resources office or online at <http://www.azwater.gov>.



**Arizona Department of Water Resources**  
 Groundwater Management Support Section  
 P.O. Box 458 • Phoenix, Arizona 85001-0458  
 (602) 417-2470 • (800) 352-8488  
 www.water.az.gov

### Request to Change Well Information

- ❖ Review instructions prior to completing form in black or blue ink.
- ❖ You must include with your Notice:
  - > check or money order for any required fee(s)
- ❖ Authority for fee: A.A.C. R12-15-151(B)(4)(a), A.R.S. § 45-113(B)

DEC - 7 2005

|  |
|--|
| FILE NUMBER                            |
| WELL REGISTRATION NUMBER<br>55 - 85584 |

#### SECTION 1. REGISTRY INFORMATION

|   |  |                   |               |               |              |              |
|---|--|-------------------|---------------|---------------|--------------|--------------|
| <b>Well Owner</b>   | <b>Location of Well</b>  |                   |               |               |              |              |
| FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL<br>John E. & Virginia C. Courtney | WELL LOCATION ADDRESS (IF ANY)<br>1620 W. Lazy K Road, New River, AZ 85087 |                   |               |               |              |              |
| MAILING ADDRESS<br>5480 E. Seven Palms Drive  | TOWNSHIP (N/S)<br>7N   | RANGE (E/W)<br>3E | SECTION<br>19 | 160 ACRE<br>¼ | 40 ACRE<br>¼ | 10 ACRE<br>¼ |
| CITY / STATE / ZIP CODE<br>Cave Creek, AZ 85331                                     | LATITUDE   |                   |               | LONGITUDE     |              |              |
| CONTACT PERSON NAME AND TITLE<br>Owner  | Degrees  | Minutes           | Seconds       | Degrees       | Minutes      | Seconds      |
| TELEPHONE NUMBER<br>480-595-1798  | COUNTY ASSESSOR'S PARCEL ID NUMBER   |                   |               | PARCEL        |              |              |
| FAX   | BOOK<br>202  | MAP<br>25         | PARCEL<br>012 |               |              |              |
|   | COUNTY WHERE WELL IS LOCATED<br>Maricopa                                   |                   |               |               |              |              |

#### Type of Request (CHECK ONE)

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

#### SECTION 2. REQUEST TO CHANGE WELL DRILLING CONTRACTOR (\$10 Fee Required)

• If drilling or abandoning a well, the Department must receive this request and issue authorization to the new drilling firm prior to the commencement of well drilling or abandonment. **\$10 FEE**

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

#### SECTION 3. STATEMENT OF CHANGE OF WELL OWNERSHIP (\$10 Fee Required)

• If this change pertains to more than one well and the names are the same, only one \$10 fee is required. **\$10 FEE**

|   |   |     |
|---|---|-----|
| <b>Previous Well Owner</b>  | <b>New Well Owner</b>   |     |
| FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL<br>John E. & Virginia C. Courtney | FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL<br>Paul William & Patricia Niccolls |     |
| MAILING ADDRESS<br>5480 E. Seven Palms Drive  | MAILING ADDRESS<br>8802 E. University Drive, #29                                      |     |
| CITY / STATE / ZIP CODE<br>Cave Creek, AZ 85331                                     | CITY / STATE / ZIP CODE<br>Mesa, AZ 85027   |     |
| CONTACT PERSON NAME AND TITLE<br>Owner  | CONTACT PERSON NAME AND TITLE<br>Owner  |     |
| TELEPHONE NUMBER<br>480-595-1798  | TELEPHONE NUMBER<br>480-534-9532  | FAX |

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

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

EXPLAIN

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

TYPE OR PRINT NAME AND TITLE: PAUL W. NICCOLLS      SIGNATURE OF WELL OWNER: [Signature]      DATE: 12/2/05



Arizona Department of Water Resources  
 Groundwater Management Support Section  
 P.O. Box 458 • Phoenix, Arizona 85001-0458  
 (602) 417-2470 • (800) 352-8488  
 www.water.az.gov

### Request to Change Well Information

- ❖ Review instructions prior to completing form in black or blue ink.
- ❖ You must include with your Notice:
  - check or money order for any required fee(s)
- ❖ Authority for fee: A.A.C. R12-15-151(B)(4)(a), A.R.S. § 45-113(B)

RECEIVED  
 DEC - 7 2005

|  |
|--|
| FILE NUMBER                            |
| WELL REGISTRATION NUMBER<br>55 - 85584 |

\*\* PLEASE PRINT CLEARLY \*\*

#### SECTION 1. REGISTRY INFORMATION

|   |  |  |            |         |           |         |         |
|---|--|--|------------|---------|-----------|---------|---------|
| <b>Well Owner</b>                                 |  | <b>Location of Well</b>                  |            |         |           |         |         |
| FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL |  | WELL LOCATION ADDRESS (IF ANY)           |            |         |           |         |         |
| John E. & Virginia C. Courtney                    |  | 1620 W. Lazy K Road, New River, AZ 85087 |            |         |           |         |         |
| MAILING ADDRESS                                   |  | TOWNSHIP (NS)                            | RANGE (EW) | SECTION | 160 ACRE  | 40 ACRE | 10 ACRE |
| 5480 E. Seven Palms Drive                         |  | 7N                                       | 3E         | 19      | ¼         | ¼       | ¼       |
| CITY / STATE / ZIP CODE                           |  | LATITUDE                                 |            |         | LONGITUDE |         |         |
|   |  | °   .   "                                |            |         | °   .   " |         |         |

|                                       |                              |   |          |
|---------------------------------------|------------------------------|---|----------|
| NORTH<br>AMERICAN<br>TITLE<br>COMPANY | Carefree - 21                | Wells Fargo Arizona, N.A.                 | 21012481 |
|                                       | 36800 N Sidewinder Rd, #C-26 | 3002 N. Central Ave.<br>Phoenix, AZ 85012 |          |
|                                       | Carefree, AZ 85377           | 91-627/1221                               |          |
|                                       | 480-488-9722                 |   |          |

|                |          |            |
|----------------|----------|------------|
| ESCROW NO.     | DATE     | AMOUNT     |
| AZ-05-21002688 | 12/05/05 | *****10.00 |

PAY --Ten and 00/100 ----- Dollars

TO THE ORDER OF REF:

A.D.W.R.  
 P.O. Box 458  
 Phoenix, AZ 85001-0458

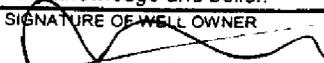
ESCROW ACCOUNT

Authorized Signature

#### SECTION 3. STATEMENT OF CHANGE OF WELL OWNERSHIP (\$10 Fee Required)

|   |  |                 |
|---|--|-----------------|
| ♦ If this change pertains to more than one well and the names are the same, only one \$10 fee is required.  |  | <b>\$10 FEE</b> |
| Previous Well Owner<br>FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL<br>John E. & Virginia C. Courtney<br>MAILING ADDRESS<br>5480 E. Seven Palms Drive<br>CITY / STATE / ZIP CODE<br>Cave Creek, AZ 85331<br>CONTACT PERSON NAME AND TITLE<br>Owner<br>TELEPHONE NUMBER<br>480-595-1798 |  |                 |
| New Well Owner<br>FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL<br>Paul William & Patricia Niccolls<br>MAILING ADDRESS<br>8802 E. University Drive, #29<br>CITY / STATE / ZIP CODE<br>Mesa, AZ 85027<br>CONTACT PERSON NAME AND TITLE<br>Owner<br>TELEPHONE NUMBER<br>480-534-9532      |  |                 |

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

|  |   |
|--|---|
| <b>NO FEE</b>  |   |
| NOTE: Applies only to wells that have already been drilled. For proposed wells, an amended Notice of Intent to Drill a Well must be filed. |   |
| EXPLAIN  |   |
|   |   |
| I HEREBY CERTIFY that the above statements are true to the best of my knowledge and belief.  |   |
| TYPE OR PRINT NAME AND TITLE<br>PAUL W. NICCOLLS   | SIGNATURE OF WELL OWNER<br> |
|  | DATE<br>12/2/05   |



Groundwater Management Support Section  
 P.O. Box 458 • Phoenix, Arizona 85001-0458  
 (602) 417-2470 • (800) 352-8488  
 www.water.az.gov

H77-2 190 AL  
**Request to Change Well Information**

- Review instructions prior to completing form in black or blue ink.
- You must include with your Notice:
  - check or money order for any required fee(s)
- Authority for fee: A.A.C. R12-15-151(B)(4)(a), A.R.S. § 45-113(B)

RECEIVED  
 SEP 16 2005

FILE NUMBER  
 WELL REGISTRATION NUMBER  
 55 085584

\*\* PLEASE PRINT CLEARLY \*\*

**SECTION 1. REGISTRY INFORMATION**

|  |  |   |                          |                      |                           |                          |                          |
|--|--|---|--------------------------|----------------------|---------------------------|--------------------------|--------------------------|
| <b>Well Owner</b>  |  | <b>Location of Well</b>   |                          |                      |                           |                          |                          |
| FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL<br><i>Charles H + Laura Riegel</i> |  | WELL LOCATION ADDRESS (IF ANY)<br><i>1620 W. Daisy K Rd. New River AZ</i> |                          |                      |                           |                          |                          |
| MAILING ADDRESS<br><i>48412 N. Blk Cyn Hwy # 144</i>                                 |  | TOWNSHIP (N/S)<br><i>7N</i>   | RANGE (E/W)<br><i>3E</i> | SECTION<br><i>19</i> | 160 ACRE<br><i>SW 1/4</i> | 40 ACRE<br><i>NE 1/4</i> | 10 ACRE<br><i>SW 1/4</i> |
| CITY / STATE / ZIP CODE<br><i>New River AZ 85087</i>                                 |  | LATITUDE  |                          | LONGITUDE            |                           |                          |                          |
|  |  | Degrees   |                          | Minutes              |                           | Seconds                  |                          |



Carefree - 21  
 36800 N Sidewinder Rd, #C-26  
 Carefree, AZ 85377  
 480-488-9722

Wells Fargo Arizona, N.A.  
 3002 N. Central Ave.  
 Phoenix, AZ 85012  
 91-527/1221

21011995

ESCROW NO.  
 AZ-05-21002595

DATE  
 09/14/05

AMOUNT  
 \*\*\*\*\*10.00

PAY --Ten and 00/100--

Dollars

TO THE ORDER OF  
 A.D.W.R.  
 P.O. Box 458  
 Phoenix, AZ 85001-0458

REF: 55-85584

ANSWERED SEP 20 2005

ES-CROW ACCOUNT  
 [Redacted Signature]  
 Authorized Signature

**SECTION 3. STATEMENT OF CHANGE OF WELL OWNER**

If this change pertains to more than one well and the names are the same, only one \$10 fee is required.

|  |     |   |     |
|--|-----|---|-----|
| <b>Previous Well Owner</b>   |     | <b>New Well Owner</b>   |     |
| FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL<br><i>Charles H + Laura Riegel</i> |     | FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL<br><i>John + Virginia Country</i> |     |
| MAILING ADDRESS<br><i>48412 N. Blk Cyn Hwy # 144</i>                                 |     | MAILING ADDRESS<br><i>5480 E. Seven Palms Dr</i>                                    |     |
| CITY / STATE / ZIP CODE<br><i>New River AZ 85087</i>                                 |     | CITY / STATE / ZIP CODE<br><i>Cave Creek AZ 85331</i>                               |     |
| CONTACT PERSON NAME AND TITLE<br><i>Owner</i>  |     | CONTACT PERSON NAME AND TITLE<br><i>Owner</i>                                       |     |
| TELEPHONE NUMBER<br><i>623 465 7669</i>  | FAX | TELEPHONE NUMBER<br><i>480-595-1798</i>   | FAX |

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

NO FEE

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

EXPLAIN  
*[Handwritten initials]*

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

TYPE OR PRINT NAME AND TITLE  
**LAURA M. RIEGEL**

SIGNATURE OF WELL OWNER  
*Laura M. Riegel*

DATE  
 9/13/05



Arizona Department of Water Resources  
Groundwater Management Support Section  
P.O. Box 458 • Phoenix, Arizona 85001-0458  
(602) 417-2470 • (800) 352-8488  
www.water.az.gov

A17-3790 AL  
**Request to Change Well Information**

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  - ❖ You must include with your Notice:
    - check or money order for any required fee(s)
  - ❖ Authority for fee: A.A.C. R12-15-151(B)(4)(a), A.R.S. § 45-113(B)
- \*\* PLEASE PRINT CLEARLY \*\*

|   |
|---|
| FILE NUMBER                                   |
| WELL REGISTRATION NUMBER<br><b>55 - 85584</b> |

RECEIVED  
SEP 16 2005

**SECTION 1. REGISTRY INFORMATION**

|  |  |  |             |            |               |               |               |
|--|--|--|-------------|------------|---------------|---------------|---------------|
| <b>Well Owner</b>  |  | <b>Location of Well</b>  |             |            |               |               |               |
| FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL<br><i>Charles H + Laura Riegel</i> |  | WELL LOCATION ADDRESS (IF ANY)<br><i>1620 W. Lazy K Rd. New River AZ</i> |             |            |               |               |               |
| MAILING ADDRESS<br><i>48412 N. Blk Cyn Hwy # 144</i>                                 |  | TOWNSHIP (N/S)   | RANGE (E/W) | SECTION    | 160 ACRE      | 40 ACRE       | 10 ACRE       |
| CITY / STATE / ZIP CODE<br><i>New River Az 85087</i>                                 |  | <i>7N</i>  | <i>3E</i>   | <i>19</i>  | <i>SW 1/4</i> | <i>NE 1/4</i> | <i>SW 1/4</i> |
| CONTACT PERSON NAME AND TITLE<br><i>Owner</i>  |  | LATITUDE   |             |            | LONGITUDE     |               |               |
| TELEPHONE NUMBER<br><i>623-465-7669</i>  |  | Degrees  | Minutes     | Seconds    | Degrees       | Minutes       | Seconds       |
| FAX  |  | COUNTY ASSESSOR'S PARCEL ID NUMBER                                       |             |            | PARCEL        |               |               |
|  |  | BOOK   | MAP         | PARCEL     |               |               |               |
|  |  | <i>202</i>   | <i>25</i>   | <i>012</i> |               |               |               |
|  |  | COUNTY WHERE WELL IS LOCATED<br><i>Maricopa</i>                          |             |            |               |               |               |

**Type of Request (CHECK ONE)**

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

**SECTION 2. REQUEST TO CHANGE WELL DRILLING CONTRACTOR (\$10 Fee Required)**

❖ If drilling or abandoning a well, the Department must receive this request and issue authorization to the new drilling firm prior to the commencement of well drilling or abandonment. **\$10 FEE**

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

**SECTION 3. STATEMENT OF CHANGE OF WELL OWNERSHIP (\$10 Fee Required)**

❖ If this change pertains to more than one well and the names are the same, only one \$10 fee is required. **\$10 FEE**

|  |     |  |     |
|--|-----|--|-----|
| <b>Previous Well Owner</b>   |     | <b>New Well Owner</b>  |     |
| FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL<br><i>Charles H + Laura Riegel</i> |     | FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL<br><i>John E + Virginia Courtney</i> |     |
| MAILING ADDRESS<br><i>48412 N. Blk Cyn Hwy # 144</i>                                 |     | MAILING ADDRESS<br><i>5480 E. Seven Palms Dr</i>                                       |     |
| CITY / STATE / ZIP CODE<br><i>New River Az 85087</i>                                 |     | CITY / STATE / ZIP CODE<br><i>Cool Creek Az 85331</i>                                  |     |
| CONTACT PERSON NAME AND TITLE<br><i>Owner</i>  |     | CONTACT PERSON NAME AND TITLE<br><i>Owner</i>  |     |
| TELEPHONE NUMBER<br><i>623 465 7669</i>  | FAX | TELEPHONE NUMBER<br><i>480-595-1798</i>  | FAX |

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

**NO FEE**

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

EXPLAIN

*llb*

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

|  |   |                        |
|--|---|------------------------|
| TYPE OR PRINT NAME AND TITLE<br><b>LAURA M. RIEGEL</b> | SIGNATURE OF WELL OWNER<br><i>Laura M. Riegel</i> | DATE<br><i>9/13/05</i> |
|--|---|------------------------|

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 Charles H. Riegel Name  
3460 E. Jeddow Pkwy, Az. 85039 Address

2. Lessee or Operator \_\_\_\_\_ Name  
\_\_\_\_\_ Address

3. Driller Gene Campbell Name  
Box 933 W. DeWittsburg, Az. 85255 Address

4. Location of well: T7N, R3E, Sec. 19, SW 1/4 NE 1/4 SW 1/4

5. Permit No. \_\_\_\_\_  
(if issued)

DESCRIPTION OF WELL

6. Total depth of hole 300 ft.

7. Type of Casing PVC

8. Diameter and length of casing 5 in. from 0 to 300, \_\_\_\_\_ in from \_\_\_\_\_ to \_\_\_\_\_.

9. Method of sealing at reduction points \_\_\_\_\_

10. Perforated from 990 to 300, from \_\_\_\_\_ to \_\_\_\_\_, from \_\_\_\_\_ to \_\_\_\_\_

11. Size of cuts 1/8" Number of cuts per foot 8

12. If screen was installed: Length \_\_\_\_\_ ft. Diam \_\_\_\_\_ in. Type \_\_\_\_\_

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

14. Date started 9 16 80.  
Month day year

15. Date completed 9 17 80.  
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.  
\_\_\_\_\_  
\_\_\_\_\_

18. If flowing well, state method of flow regulation \_\_\_\_\_

19. REMARKS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

|                                  |               |
|----------------------------------|---------------|
| DO NOT WRITE IN THIS SPACE       |               |
| OFFICE RECORD                    |               |
| Registration No. <u>55-85584</u> |               |
| Received _____                   | By _____      |
| Entered <u>11-17-80</u>          | By <u>Red</u> |
| File No. <u>A(7-3)19 cac</u>     |               |



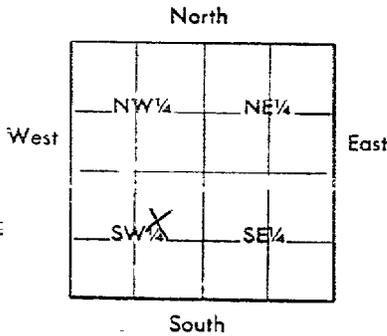
EXEMPT WELL  
FILING FEE \$3.00

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 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 a maximum capacity of not more than 35 gallons per minute which is used to withdraw groundwater. Exempt well may include the non-commercial irrigation of not more than 1 acre of land.

LOCATION OF WELL



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

DESCRIPTION OF WELL

7. Diameter 5 in.  
Depth 200 ft

8. Type of Casing  
plastic

9. Principle use of Water  
Household - livestock

10. Other uses intended  
gardening  
If non-commercial irrigation state approximate area being cultivated.

11. Construction will start  
about Aug 1980  
month year

12. Design Pump Capacity  
10 GPM

13. Action Requested  
Drill

Deepen \_\_\_\_\_

Replace \_\_\_\_\_

This Notice Filed By:  
(check one)

Owner

Lessee \_\_\_\_\_

Driller \_\_\_\_\_

1. Township 7 North

2. Range 3 E. of Salt River

3. Section 19

4. SW 1/4 NE 1/4 SW 1/4  
10 acre subdivision

5. County Marcopica

6. Owner of Well  
Name Charles H. Riegel  
Address 3460 E. Ludlow  
Phoenix AZ.  
City Paradise Valley State 85032 zip  
992-0481  
Telephone

DO NOT WRITE IN THIS SPACE  
OFFICE RECORD  
File No. A(7-3)19  
Filed 8-19-80 By h  
Input 8-21-80 By But  
Duplicate Mailed 8-27-80 By h  
Registration No. 55-85564  
AMA Non-Expansion Area  
Phoenix, AZ

Name Charles H. Riegel  
Address 3460 E. Ludlow  
Phoenix  
City Paradise Valley State Ariz zip 85032

15. Drillers Name:  
Name Gene Campbell  
Address P.O. Box 933  
Weekendenburg Ariz 85358  
City 46892 State T-35 zip  
Drillers License Number 684-7546

MICROFILMED

INSTRUCTIONS:

1. Fill out the form in duplicate and submit to the Department of Water Resources, 222 North Central Ave., Suite 850, Phoenix, Arizona 85004.
2. If the new exempt well is in fact a replacement (or deepening) well, state the registration number of the existing well NONE
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, Charles H. Riegel, 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.

KEL FOX, CH.  
JOHN L. LEIBER, V. CH.  
WESLEY E. STEINER  
EXECUTIVE DIRECTOR  
AND  
STATE WATER ENGINEER  
VICKIE MOONEY  
SECRETARY



BRUCE SABBITT GOVERNOR  
DEPARTMENT OF WATER RESOURCES  
222 North Central Ave., Suite 850  
Phoenix, Arizona 85004  
Telephone (602) 255-1581

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August 27, 1980

Charles H. Riegel  
3460 E. Ludlow  
Phoenix, AZ 85032

Registration No. 55-85584

Dear Well Owner:

This copy of Notice of Intention to Drill Well is returned to you for your records. Your driller has been mailed separately a Well Drilling Card, Well Drilling Report, and Completion Report.

A.R.S. 45-600 requires the driller to furnish this Department a complete and accurate log of the well within 30 days of completion of drilling, and a Completion Report within 30 days after installation of pumping equipment.

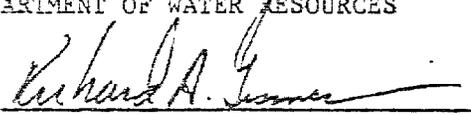
Also enclosed for your future use is a Change of Well Information Form. Per A.R.S. 45-593, the person to whom a well is registered shall notify this Department of a change in ownership of the well and information pertaining to the physical aspects of the well to keep the well registration record current and accurate.

In the event it is necessary to change the location of the proposed well, you should obtain the written permission of the Department of Water Resources before proceeding with the drilling.

Very truly yours,

DEPARTMENT OF WATER RESOURCES

By:

  
Richard A. Gessner, Chief  
Records Section

RAG/ps

REC'D. OFFICE

Laura M. or Charles H. Riegel  
 3460 E. Ludlow  
 Phoenix, AZ 85032

STATE OF ARIZONA  
 ARIZONA WATER COMMISSION  
 WATER RIGHTS ADMINISTRATION  
 222 N. CENTRAL AVE - SUITE 550  
 PHOENIX, ARIZONA 85004

RECEIPT - FILE

No 5417

|            |                    |
|------------|--------------------|
| KIND ENTRY | FILE REFERENCE NO. |
| 55         | 85584              |
|            | THRU               |

| ACCOUNT NO.    | AGENCY | CHAPTER | DIV. | INT. ACCT. | ITEM DESCRIPTION   | RATE | \$ AMOUNT |
|----------------|--------|---------|------|------------|--|------|-----------|
|                |        |         |      |            | Filing fee for Notice of Intention to Drill Well<br>An Exempt Well |      | 3.00      |
|                |        |         |      |            | Water Rights (GW)  |      |           |
|                |        |         |      |            | File # A(7-3)19 cac  |      |           |
|                |        |         |      |            | Registration #55-85584   |      |           |
|                |        |         |      |            | Check # 644  |      |           |
| WRITER PAYMENT |        |         |      |            |  |      |           |
| GUESTS 1       |        |         |      |            |  |      |           |
| CHK NO 644     |        |         |      |            |  |      |           |
| 55-I 3.00      |        |         |      |            |  |      |           |
| TAX 0.00       |        |         |      |            |  |      |           |
| TOTAL 3.00     |        |         |      |            |  |      |           |
| GEN.CHEK 3.00  |        |         |      |            |  |      |           |
| # 1765 A 10:46 |        |         |      |            |  |      |           |

08-19-80

TOTAL \$

3.00

Registration No. 55-85584  
Owner of  
Well Site Charles H. Riegel  
File No. A(7-3)19 cac

COMPLETION REPORT

1. Completion Report 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 4 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 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.
4. The static groundwater level should be measured in feet from the land surface immediately prior to the well capacity test.

*No Equip. Installed*

LOCATION OF THE WELL

T7N, R3E, Sec. 19, SW $\frac{1}{4}$  NE $\frac{1}{4}$  SW $\frac{1}{4}$

Date Well Completed 9-17-70 Depth of Well 300'

1. Well Test:  
Test Pumping Capacity \_\_\_\_\_ Date Well Tested \_\_\_\_\_  
(Gal. per min.)

Method of Discharge Measurement \_\_\_\_\_  
(weir, orifice, current meter, etc.)

Static Groundwater Level \_\_\_\_\_ ft. Drawdown \_\_\_\_\_ ft.  
Total Pumping Lift \_\_\_\_\_ ft. Drawdown \_\_\_\_\_ lbs.  
(Flowing Well)

2. Equipment Installed:

Kind of Pump \_\_\_\_\_  
(turbine, centrifugal, etc.)

Kind of Power \_\_\_\_\_ H.P. Rating of Motor \_\_\_\_\_  
(Elec., Nat. Gas, Etc.)

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

Signature \_\_\_\_\_  
Address \_\_\_\_\_

\_\_\_\_\_, 19\_\_\_\_  
Date

\_\_\_\_\_  
City State Zip

*4110-2-1000*

