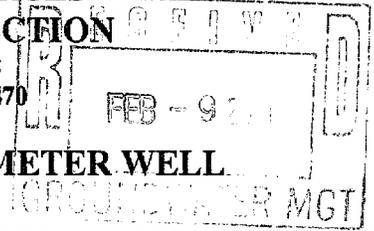


**ARIZONA DEPARTMENT OF WATER RESOURCES
GROUNDWATER MANAGEMENT SUPPORT SECTION**

MAIL TO: P.O. BOX 458, PHOENIX, ARIZONA 85001-0458
FOR INFORMATION: CALL MONICA ORTIZ AT 602-417-2470



NOTICE OF INTENTION TO DRILL MONITOR/PIEZOMETER WELL

PLEASE READ GENERAL INSTRUCTIONS AND CONDITIONS ON REVERSE SIDE OF THIS FORM BEFORE COMPLETING.

1. Well/land Location:

14 N S 13 E W 14
Township Range Section
NW 1/4 SW 1/4 NE 1/4
10 Acre 40 Acre 160 Acre

2. Position location of the well on the land:

Latitude 110 ° 39 ' 21 "
Longitude 32 ° 13 ' 01 "

3. County: Pima

4. Owner of the well:

City of Tucson
Name
P.O. Box 27210
Mailing Address
Tucson AZ 85726
City State Zip
Telephone No. (520) 791-5414

5. Lessee of the land of wellsite:

Name _____
Mailing Address _____
City State Zip _____
Telephone No. _____

6. Owner of the Land of Wellsite:

City of Tucson
Name
P.O. Box 27210
Mailing Address
Tucson AZ 85726
City State Zip
Telephone No. (520) 791-5414

7. Consulting firm:

Hydro Geo Chem, Inc.
Name
Jinshan Tang
Contact Person
Telephone No. (520) 293-1500

8. Purpose of well drilled pursuant to this notice:

Monitor vapor monitoring well
Piezometer _____

9. If for deepening or modifying, list well registration number:

55- _____

10. Will this proposed well be associated with a permit: Yes _____ No X

If yes, Permit No. _____

11. Construction will start:

2 / 7 / 2001
Month Day Year

12. Period well will remain in use:

5 Months/Years

13. For monitoring wells, is pump equipment to be installed?

Yes _____ No _____

(a) If yes, design pump capacity: _____

(b) What use will be made of the water: _____

SPECIAL REQUIREMENTS

VARIANCE GRANTED

*** FOR DEPARTMENT USE ONLY**

File No. D(14-13)14 ACB
Filed 2/9/01 By WB
Input _____ By _____

DUPLICATE
Mailed 2/20/01 By WB
Registration 55-585611
AMA/INA Tucson
W/S 09 S/B 16
MO _____

THF Drilling, Inc.
Name
2420 S. 16th Avenue
Mailing Address
Phoenix AZ 85007
City State Zip
(602) 254-6586
Telephone No.
611
DWR License Number
099597-A4
ROC License Category

15. Proposed method of abandonment of well after project is completed: surface completion material to be removed, well to be filled and sealed with cement grout, pursuant to R12-15-816.

16. Is this well to monitor existing contamination? No Potential contamination: _____ Please explain: Use for soil vapor monitoring.

17. If construction plans have been coordinated with Arizona Department of Environmental Quality, who is the agency contact? None

18. If construction plans have been coordinated with Arizona Department of Water Resources, who is the agency contact? _____

**ARIZONA DEPARTMENT OF WATER RESOURCES
GROUNDWATER MANAGEMENT SUPPORT SECTION
500 North Third Street
Phoenix, Arizona 85004**

VARIANCE GRANTED

THIS AUTHORIZATION SHALL BE IN POSSESSION OF THE DRILLER DURING ALL DRILL OPERATIONS

WELL REGISTRATION NO: 55-585611

AUTHORIZED DRILLER: THF DRILLING, INC.

LICENSE NO: 611

NOTICE OF INTENTION TO DRILL A MONITOR WELL(S) HAS BEEN FILED WITH THE DEPARTMENT BY:

WELL OWNER: CITY OF TUCSON PO BOX 27210 TUCSON, AZ 85726

The well(s) is/are to be located in the:

NW ¼ of the SW ¼ of the NE ¼ Section 14 Township 14 SOUTH Range 13 EAST

No. of wells in this project: 1

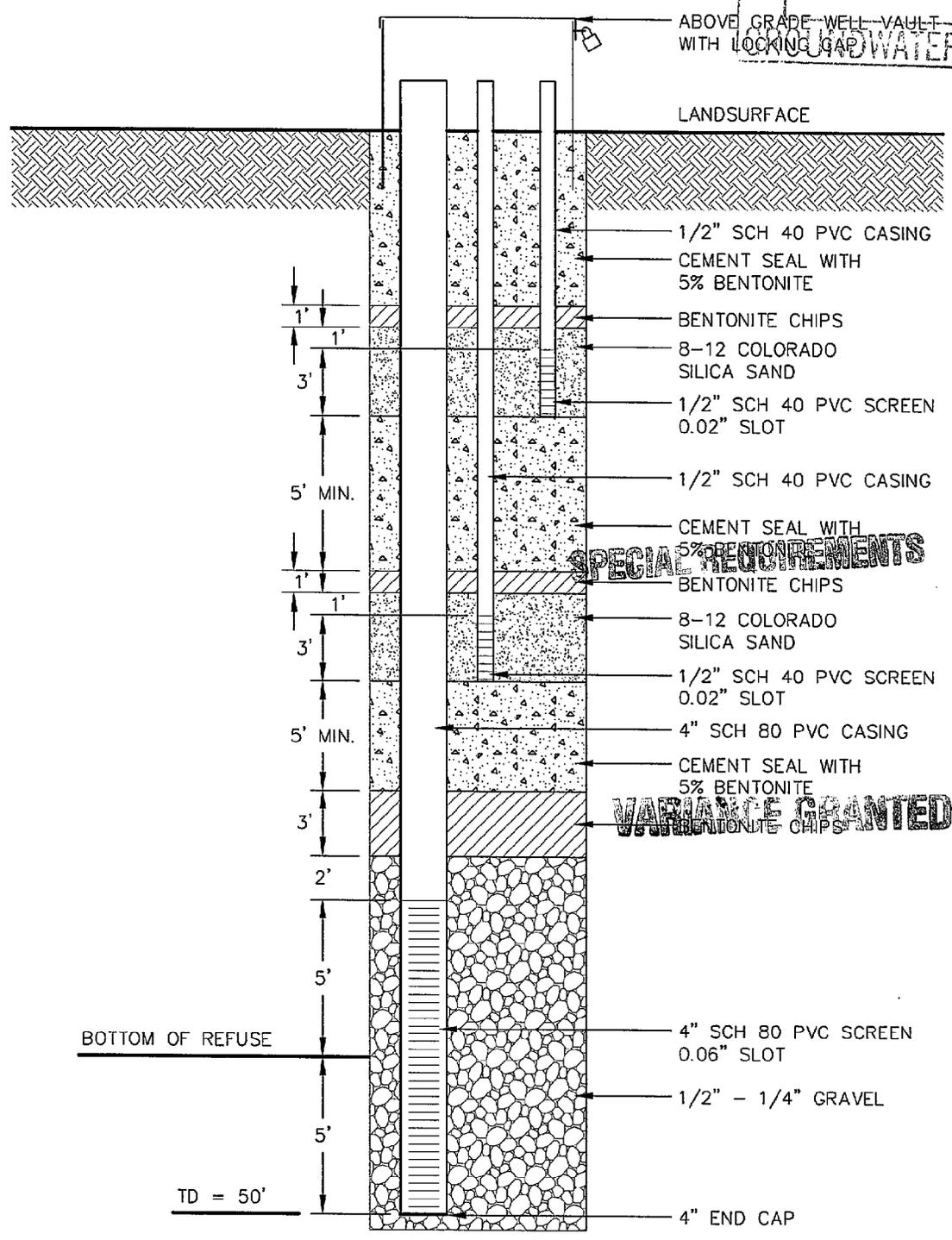
THIS AUTHORIZATION EXPIRES AT MIDNIGHT ON THE 8TH DAY OF FEBRUARY, 2002


GROUNDWATER MANAGEMENT SUPPORT

**THE DRILLER MUST FILE A LOG OF THE WELL
WITHIN 30 DAYS OF COMPLETION OF DRILLING**



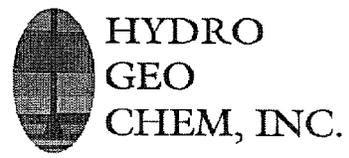
D E C E I V E D
 FEB - 9 2001
 GROUNDWATER MGT



NOTE:
REGIONAL WATER TABLE BETWEEN 80' AND 120' BLS.

NAME: K:\745000\74502001.DWG DATE: FEB 07, 2001 TIME: 8:43 AM

NOT TO SCALE



**HYDRO
GEO
CHEM, INC.**

**MULTI-PURPOSE WELL CONSTRUCTION DIAGRAM
AT RIO NUEVO SITE**

Approved JT	Date 2/5/01	Revised	Date	Reference: 74502001	FIG.
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ARIZONA DEPARTMENT OF WATER RESOURCES

Hydrology Division

500 North Third Street, Phoenix, Arizona 85004

Telephone 602 417-2448

Fax 602 417-2425



JANE DEE HULL
Governor

RITA PEARSON
MAGUIRE
Director

February 15, 2001

THF Drilling, Inc.
2420 South 16th Avenue
Phoenix, AZ. 85007

Attn: Ray Quintero

**RE: Variances for Construction of Three Vapor Monitor Wells
Registration Numbers 55-585610 through 55-585612**

Dear Mr. Quintero:

The Arizona Department of Water Resources received your request dated February 9, 2001 for construction variances for three vapor monitor wells to be located in Pima County. The purpose of these wells will be to evaluate **potential** groundwater contamination.

The Arizona Department of Water Resources approves this request for the following variances:

- Thermoplastic casing with a water tight cap may be used in lieu of steel (R12-15-811.B.1).
- The length of the surface seal may be reduced to 15 feet below ground surface due to a possible shallow water table (R12-15-811.B.1).

The following *special requirements* are conditions for these variances (R12-15-821.):

- The casing shall comply with ASTM Standard Guide D5092, Section 6.5.
- The wells shall be constructed per the "Variance Granted" Notice of Intention to Drill.
- The wells shall be abandoned (decommissioned) in accordance with A.A.C. R12-15-816.

If you have any questions, contact Bruce Hammett of my staff at 602-417-2400 ext. # 7301.

Sincerely,

Frank Corkhill
Technical Support Section Supervisor

ARIZONA DEPARTMENT OF WATER RESOURCES

500 North 3rd Street, Phoenix, Arizona 85004
Telephone (602) 417-2470
Fax (602) 417-2422



JANE DEE HULL
Governor

RITA PEARSON MAGUIRE
Director

February 20, 2001

CITY OF TUCSON
PO BOX 27210
TUCSON, AZ 85726

Registration No. 55-585611
File No. D(14-13) 14 ACB

Dear Well Owner:

Enclosed for your records is an annotated copy of the Notice of Intention to Drill a well. This is returned to you as evidence of compliance with A.R.S. §45-596. A drilling card has been mailed to your designated driller. Prior to drilling he must have it in his possession.

Since this well is being drilled as a Monitor well, or for Cathodic Protection, Grounding, Geotechnical or Piezometer purposes, our standard driller report form is also being furnished to the driller. He is required to complete it and return it to the Department within 30 days after the completion of the well. A Completion Report form is being furnished for monitor wells where pump installation is authorized. This must be completed within thirty days of installation as required by A.R.S. §45-600.

A Change of Well Information form is enclosed for your future use. If you deem it necessary to change the location of the proposed well, please notify the Department on the enclosed form. A properly amended Drilling Card will then be issued and must be in possession of the driller before drilling begins. During the drilling of a new well, if it is determined that it must be abandoned, then a Well Abandonment Completion Report must be submitted per R12-15-816.F.

Per A.R.S. §45-593, the person to whom a well is registered shall notify this Department of a change of ownership of the well and/or information pertaining to the physical characteristics of the well, in order to keep the well registration file current and accurate.

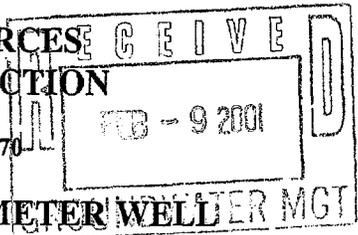
Sincerely,

Toni Bergeman
Water Resource Technician
Groundwater Management Support Section

Enclosures

**ARIZONA DEPARTMENT OF WATER RESOURCES
GROUNDWATER MANAGEMENT SUPPORT SECTION**

MAIL TO: P.O. BOX 458, PHOENIX, ARIZONA 85001-0458
FOR INFORMATION: CALL MONICA ORTIZ AT 602-417-2470



NOTICE OF INTENTION TO DRILL MONITOR/PIEZOMETER WELL

PLEASE READ GENERAL INSTRUCTIONS AND CONDITIONS ON REVERSE SIDE OF THIS FORM BEFORE COMPLETING.

1. Well/Land Location:

14 N(S) 13 E/W 14
Township Range Section
NW 1/4 SW 1/4 NE 1/4
10 Acre 40 Acre 160 Acre

2. Position location of the well on the land:

Latitude 110 ° 39 ' 22 "
Longitude 32 ° 13 ' 02 "

3. County: Pima

4. Owner of the well:

City of Tucson
Name
P.O. Box 27210
Mailing Address
Tucson AZ 85726
City State Zip
Telephone No. (520) 791-5414

6. Owner of the Land of Wellsite:

City of Tucson
Name
P.O. Box 27210
Mailing Address
Tucson, AZ 85726
City State Zip

Telephone No. (520) 791-5414

7. Consulting firm:

Hydro Geo Chem, Inc.
Name
Jinshan Tang
Contact Person
Telephone No. (520) 293-1500

8. Purpose of well drilled pursuant to this notice:

Monitor vapor monitoring wells
Piezometer

9. If for deepening or modifying, list well registration number:

55-

10. Will this proposed well be associated with a permit: Yes No X

If yes, Permit No. _____

11. Construction will start:

02 07 2001
Month Day Year

12. Period well will remain in use:

5 Months (Years)

13. For monitoring wells, is pump equipment to be installed?

Yes No X

(a) If yes, design pump capacity: _____

(b) What use will be made of the water: _____

14. Drilling Firm:

HYDRO GEO CHEM, INC.
51 W. WETMORE ROAD UNIT 101
TUCSON, ARIZONA 85705-1678
(520) 293-1500

BY ENDORSEMENT THIS CHECK WHEN PAID IS ACCEPTED AS FULL PAYMENT OF THE FOLLOWING ACCOUNT		

91-170/1221

11206

PAY Thirty and no/100 DOLLARS

DATE	TO THE ORDER OF	DESCRIPTION	CHECK NO.	NET AMOUNT
2/11/01	Ariz Dept. of Water Resources	permit	11206	30 ⁰⁰

BANK OF AMERICA
33 N. STONE TUCSON, ARIZONA 85701

17. If construction plans have been coordinated with Arizona Department of Environmental Quality, who is the agency contact? _____

None

18. If construction plans have been coordinated with Arizona Department of Water Resources, who is the agency contact? _____

VARIANCE CHECKLIST - HYDROLOGY

DATE RECEIVED 2-9-01
 DATE TO HYDRO 2-14-01
 DATE TO GMSS 2-16-01

POTENTIAL REG. Nº 55- _____
 55-585610 THRU 55-585612

FRONT OF N.O.I COMPLETE/CORRECT:	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
<hr/>		
VARIANCE (?) LETTER RECEIVED	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
WELL DIAGRAM (?) RECEIVED	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
SITE PLAN (?) RECEIVED	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>

TYPE AND NUMBER OF WELLS:

<u>3</u>	MONITOR	<input type="checkbox"/>	CATHODIC PROTECTION
<input type="checkbox"/>	PIEZOMETER	<input type="checkbox"/>	GROUNDING
<input type="checkbox"/>	GEOTECHNICAL	<input type="checkbox"/>	HEAT PUMP
<input type="checkbox"/>	MINERAL EXPLORATION	<input type="checkbox"/>	
<input type="checkbox"/>	WATER PRODUCTION	<input type="checkbox"/>	OTHER _____

DESCRIBE TYPE OF WELL

VARIANCE:

<input checked="" type="checkbox"/>	REQUIRED	<input checked="" type="checkbox"/>	GRANTED
<input type="checkbox"/>	NOT REQUIRED	<input type="checkbox"/>	NOT GRANTED
<input type="checkbox"/>		<input type="checkbox"/>	LETTER ISSUED

ATTENTION!!! NOTICE OF INTENT TEAM:

HARD COPY OF LETTER TO FOLLOW
 CALL FOR PICKUP

COMMENTS: OK - Grlr

