Arizona Department of Water Resources
Water Management Division
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8500 • (602) 771-8690 fax
• www.azwater.gov •

Notice of Intent to Drill, Deepen, Replace or Modify a Well

(except a Non-Exempt Well in an Active Management Area)

$150 or $100 FEE

- Review instructions prior to completing form in black or blue ink.
- You must include with your Notice:
  - Check or money order in the amount of the appropriate filing fee.
  - For a well located within an AMA or INA, the fee is $150.00.
  - For a well not located within an AMA or INA, the fee is $100.00 if the well will be used solely for domestic purposes (see page 2 and instructions) and will have a pump with a maximum capacity of not more than 35 gallons per minute. Otherwise, the fee is $150.00.
- Authority for fee: A.R.S. § 45-596 and A.A.C. R12-15-104.

AMA / INA	B	SB
—	LCR	44
RECEIVED DATE	WS	
	03	
ISSUED DATE	WQARF	CERCLA
6/19/15	—	
LEGAL REVIEW IF APP	REASONING	

FILE NUMBER: A(21-7)3 DDD

WELL REGISTRATION NUMBER: 55-918329

SECTION 1. COUNTY OR LOCAL HEALTH AUTHORITY APPROVAL (if applicable)

If water from the proposed well will be used for domestic purposes on a parcel of land of 5 or fewer acres, the applicable county or local health authority must endorse all items in Section 1 within one year before submission to the Department of Water Resources. You must also attach a site plan (pg. 3).

CHECK ONE

- [x] County or Local Health Authority Recommends Approval (pursuant to A.R.S. § 45-596 (G) and (F))
  - [x] Field Inspection Performed
  - [ ] Site Plan Review Only
- [ ] Insufficient Information to Make a Determination

RECEIVED JUL 07 2014 ARIZONA DEPARTMENT OF WATER RESOURCES

Official County or Local Seal or Stamp: Coconino County Environmental Health Services APPROVED BY Bi Bizzell DATE SIGNED 6/26/14 ARIZONA, U.S.A.

COUNTY OR LOCAL AUTHORITY NAME AND TITLE: Bi Bizzell / R.S.

TELEPHONE NUMBER: (928) 679-8753

DATE: 6/26/14

COUNTY OR LOCAL AUTHORITY SIGNATURE: Bi Bizzell

SECTION 2. REGISTRY INFORMATION

Well Type

CHECK ONE

- [x] Exempt (Pump has a maximum capacity of not more than 35 gpm and water is not used for irrigation purposes inside an AMA.) (*See instructions.*)
- [ ] Non-Exempt (Pump has a maximum capacity of more than 35 gpm and the well is located outside an AMA.) (*See instructions.*)

DESIGN PUMP CAPACITY: 10 Gallons Per Minute

Proposed Action

CHECK ONE

- [x] Drill New Well
- [ ] Deepen
- [ ] Replace
- [ ] Modify

If Deepening, Replacing or Modifying:

ORIGINAL WELL REGISTRATION NUMBER: 55 -

MAXIMUM CAPACITY OF ORIGINAL WELL: Gallons Per Minute

DISTANCE & DIRECTION FROM ORIGINAL WELL: Feet

Location of Well

WELL LOCATION ADDRESS (IF ANY): 3202 JACKRABBIT LN

COUNTY WHERE WELL IS LOCATED: Coconino

TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE
21 n	7E	3	SE ¼	SE ¼	SE ¼

COUNTY ASSESSOR'S PARCEL ID NUMBER			# OF ACRES
BOOK 110	MAP 12	PARCEL 0135	2.63

Place of Water Use (*Mandatory information, see instructions.*)

Is the groundwater basin where the well will be drilled the same as the place where the water will be used?	Yes	No
	X	

TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE
21 n	7E	3	SE	SE	SE

SECTION 3. OWNER INFORMATION

Well Owner

FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL: GRABOTY-RADLOFF REVOCABLE TRUST

MAILING ADDRESS: 1014 QUARTZ RD

CITY / STATE / ZIP CODE: FLAGSTAFF, AZ 86005

CONTACT PERSON NAME AND TITLE: DAVID CARPENTER - OWNER HOPE CONSTRUCTION

TELEPHONE NUMBER: 928-380-5808

FAX: 928-527-0357

Landowner (if different from Well Owner)

FULL NAME OF COMPANY, GOVERNMENT AGENCY, OR INDIVIDUAL:

MAILING ADDRESS:

CITY / STATE / ZIP CODE:

CONTACT PERSON NAME AND TITLE:

TELEPHONE NUMBER:

FAX:

SECTION 4.

Questions	Yes	No	If Yes:
1. Is the proposed well site within 100 feet of a septic tank system, sewer disposal area, landfill, hazardous materials or petroleum storage area or tank?		X	You must also request a variance (A.A.C. R12-15-818).
2. Is there another well name or identification number associated with this well (e.g., Lot 35 Well, Smith Well, etc.)?		X	PLEASE STATE
3. Is the proposed well a NEW well to be located within an Active Management Area? (*See instructions.*)		X	Unless the well is a replacement well and the total number of operable exempt wells on the land is not increasing, you must also file a supplemental form A.R.S. § 45-454(C) & (D).
4. Is the proposed well the second exempt well on this parcel for the same use?		X	If the proposed well is in an Active Management Area, you must also file a supplemental form A.R.S. § 45-454(I).

Notice of Intent to Drill, Deepen, Replace or Modify a Well

WELL REGISTRATION NUMBER
55-918329

SECTION 5. DRILLING AUTHORIZATION	
Drilling Firm	
NAME: Flagstaff Well & Supply Co.	
DWR LICENSE NUMBER: 336	ROC LICENSE NUMBER: C-53 58790
TELEPHONE NUMBER: 928-774-8243	FAX: 928-774-4266
MAILING ADDRESS: PO Box 22280	
CITY / STATE / ZIP CODE: Flagstaff, AZ 86002	
DATE CONSTRUCTION IS SCHEDULED TO BEGIN:	

SECTION 6. WATER / SITE INFORMATION	
***Principal Use* of Water**	***Other Uses* of Water**
CHECK ONE	CHECK ALL THAT APPLY
☐ Irrigation	☐ Irrigation
☐ Commercial	☐ Commercial
☒ Domestic	☐ Domestic
☐ Municipal	☐ Municipal
☐ Industrial	☐ Industrial
☐ Stock	☐ Stock
☐ Remediation	☐ Remediation
☐ Dewatering	☐ Dewatering
☐ Other* *(please specify)*:	☐ Other* *(please specify)*:

NOTE: If this is a Notice of Intent to construct a new well that will be used for the purpose of withdrawing groundwater for transportation to an Active Management Area (AMA) pursuant to A.R.S. § 45-552, 45-553, 45-554 or 45-555(A), the authorization to drill the well issued in association with this Notice **shall not be considered the approval to transport groundwater to an AMA.** *(see instructions.)*

SECTION 7. PROPOSED WELL CONSTRUCTION DESIGN (attach separate sheet if needed)

Borehole			Casing													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE (T)				PERFORATION TYPE (T)						GROUTING MATERIAL
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	12"	0	20	8"	X*				X						Cement
20	250	8"	+1	150	6"		X			X						
			150	250	6"		X							X		

* ADWR well construction standards require a surface seal consisting of a minimum of 20 feet of steel casing. Cement grout must be used to fill the annular space between the surface casing and the borehole. (A.A.C. R12-15-811(B))

The Department's issuance of an authorization to drill a well is not a determination of whether water withdrawn from the well is legally surface water or groundwater. The legal nature of the water withdrawn from the well may be the subject of court action in the future as part of a determination of surface water rights in your area. If there are court proceedings that could affect your well, you will be notified and be given the opportunity to participate. If you have questions regarding the legal nature of the water to be withdrawn from your proposed well, please consult with an experienced civil engineer, hydrologist or water rights attorney.

For the purposes of determining appropriate fees outside AMAs or INAs, "domestic purposes" is defined as "uses related to the supply, service and activities of households and private residences and includes the application of water to less than 2 acres of land to produce plants or parts of plants for sale or human consumption, or for use as feed for livestock, range livestock or poultry, as such terms are defined in A.R.S. § 3-1201."

SECTION 8. 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. *(See instructions.)*

SECTION 9. WELL OWNER AND PROPERTY OWNER SIGNATURE

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.

TYPE OR PRINT NAME AND TITLE: Karl Granroth	
SIGNATURE OF WELL OWNER: Karl Granroth	DATE: 6/19/14
SIGNATURE OF LANDOWNER, IF APPLICABLE (SEE INSTRUCTIONS)	DATE

Notice of Intent to Drill, Deepen, Replace or Modify a Well

WELL REGISTRATION NUMBER
55- 918329

CHECK ONE: ☐ FILING MANUALLY
☒ FILING ELECTRONICALLY* *DRILLER'S E-MAIL ADDRESS: ljwmyers@aol.com

*COUNTY OR LOCAL HEALTH AUTHORITY APPROVAL CODE	COUNTY APPROVAL CODE
If applicant is filing this NOI electronically via the ADWR website and County approval is required, please indicate approval by providing a County Approval Code.	2088579757

WELL SITE PLAN

NAME OF WELL OWNER	COUNTY ASSESSOR'S PARCEL ID NUMBER		
	BOOK	MAP	PARCEL
CINDROTH-RADLOFF REVOCABLE TRUST	110	12	013 S

- If this well will be a domestic well on 5 acres or less, please draw the following: (1) the boundaries of your property; (2) the proposed well location; (3) the locations of all septic tank systems and sewer systems on the property or within 100 feet of the well location, even if on neighboring properties; and (4) any permanent structures on the property that may aid in locating the well. If the parcel is vacant land or lacks a septic tank or sewer system, please indicate this.
- Indicate the distance between the proposed well location and any septic tank system or sewer system.

N
W E
S

SEE ATTACHED SITE PLAN

1" = _____ ft

COUNTY OR LOCAL AUTHORITY NAME AND TITLE	Official County or Local Seal or Stamp
Brian Buzzell / R.S.	
COUNTY OR LOCAL AUTHORITY SIGNATURE: Bi Buzzell	
TELEPHONE NUMBER: (928) 679-8753 — DATE: 6/26/14	

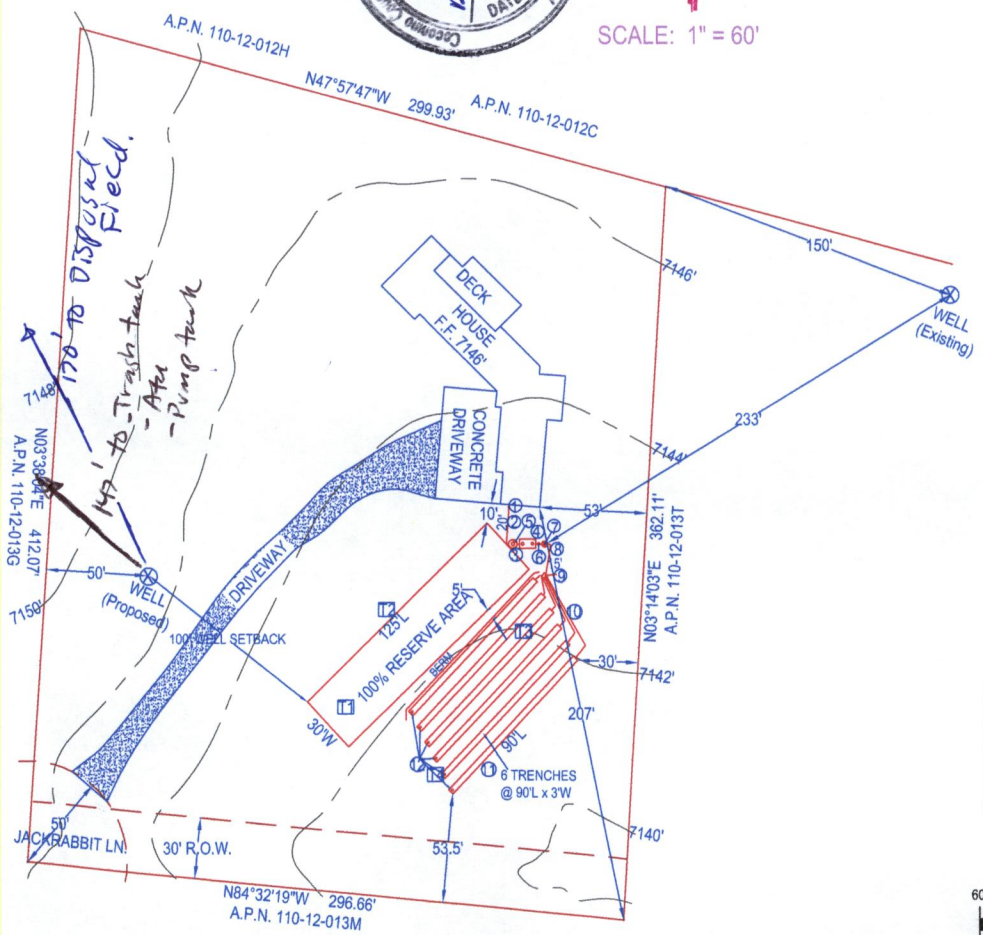
Coconino County Environmental Health Services
APPROVED BY
Bi Buzzell
DATE SIGNED 6/26/14
ARIZONA, U.S.A.

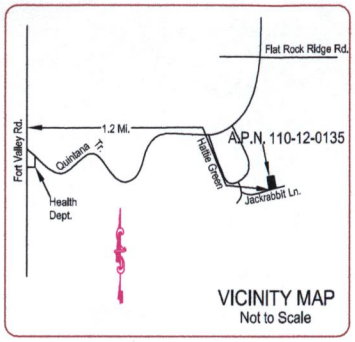
55-918329

Granroth-Radloff Revucable Trust
101 W. Quartz Rd.
Flagstaff, AZ 86005
A.P.N. 110-12-0135
Jackrabbit Ln.
2.63 Acres

Coconino County Environmental Health Services
APPROVED BY
DATE SIGNED
ARIZONA, U.S.A.

SCALE: 1" = 60'





VICINITY MAP
Not to Scale

APPROVALS

Applicant Date

CCEHS Date

COUNTY CONCEPT APPROVAL

The County approves these plans for concept only. All liability resulting from errors or omissions is the responsibility of the designer. The County does not verify or guarantee the measurements, calculations, ownership or conclusions indicated by the creator of these plans.

System Components

1. 2 Way Clean Out
2. 20' - 4" ABS Sewer Line
3. AquaKlear 400 Gal. Tank
4. AquaKlear 750FF ATU
5. Aerator/Control Panel
6. AquaKlear Chlorinator
7. 300 Gallon Chlorine Contact Tank
8. 15' - 4" SDR35 Supply Line
9. Distribution Box
10. 4" SDR35 Solid Lines - 4',10',20',28',38' & 48'L
11. 6 Trenches - 90'L (18 Chambers ea)
12. Inspection Pipes (6)

T1 Test Hole Location (4)

Setback Table

	Treatment Unit	Disposal Area
Buildings	10 Ft.	10 Ft.
Property Lines	50 Ft.	50 Ft.
Wells (Public)	100 Ft.	100 Ft.
Wells (Private)	100 Ft.	100 Ft.
Perennial or Interm. Stream	100 Ft.	100 Ft.
Dry Wash/Drainage Easement	50 Ft.	50 Ft.
Water Main/Branch Water Line	10 Ft.	10 Ft.
Cut Bank	15 Ft.	15 Ft.
Driveways	5 Ft.	5 Ft.
Water Service Line	5 Ft.	5 Ft.
Easement	5 Ft.	5 Ft.
Cutbanks/Roadside Ditches	15 Ft.	15 Ft.
Swimming Pool	5 Ft.	5 Ft.
Drinking Wate Intake	200 Ft.	200 Ft.
Lake/ Reservoir	100 Ft.	100 Ft.

CALL TWO WORKING DAYS BEFORE YOU DIG
1-800-STAKE-IT
BLUE STAKE CENTER

GRAPHIC SCALE
60 0 30 60
(In Feet)
1 Inch = 60 Feet

Site Notes

1. There is no public sewer within 200' of the property.
2. Water will be provided by a well.
3. There are no flood plains, watercourses or other features within 200' of the treatment and/or disposal field that will interfere with system operation or do not meet current setback requirements.
4. There are no wells within 100' of the system.
5. Maintain setbacks as shown in SETBACK Table.
6. Cleanouts shall be provided in the 4" sewer service 2' from the house and at all bends greater than 22.5° and runs greater than 50'.
7. Rooftop drainage from the residence shall be diverted away from all wastewater componets.
8. Chambers will be covered with 10 inches of soil.
9. Power is provided by A.P.S.
10. Property corners are marked by metal pins.
11. All easements & R.O.W.S. are accurately shown on site plan.
12. All HOA and CC&R setbacks & requirements are met.

ARIZONA WASTEWATER DESIGN
914 HULET LN.
FLAGSTAFF, AZ 86004
(928) 774-1318 FAX: (928) 774-2546

Site Plan
Vicinity Map
Setbacks

Scale: 1" = 60'
Drawing Date: 01/21/14
Checked:
Revisions:
Agency: CCPHSD
Drawn By: PAS
DRW #: 2014-06

AQUAKLEAR ATU/ CHAMBER TRENCH
Owner: Granroth-Radloff Revucable Trust
101 W. Quartz Rd. Flagstaff, AZ 86005
Coconino County
APN# 110-12-0135
Jackrabbit Ln.

ARIZONA DEPARTMENT OF WATER RESOURCES

Phoenix, Arizona 85012

DRILLING CARD

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

WELL REGISTRATION NO: **55-918329**

AUTHORIZED DRILLER: **FLAGSTAFF WELL AND SUPPLY COMPANY, INC.** LICENSE NO: **336**

NOTICE OF INTENT TO **DRILL AN EXEMPT WELL** HAS BEEN FILED WITH THE DEPARTMENT BY:

WELL OWNER: **GRANDROTH-RADLOFF REVOCABLE TRUST**

ADDRESS: **101 W. QUARTZ RD, FLAGSTAFF, AZ, 86005**

THE WELL(S) IS/ARE TO BE LOCATED IN THE:

SE 1/4 of the **SE** 1/4 of the **SE** 1/4 Section **03** Township **21 N** Range **07 E**

NO. OF WELLS IN THIS PROJECT: **1** ASSESSOR'S PARCEL NO: **110-12-013S**

THIS AUTHORIZATION EXPIRES AT MIDNIGHT ON THE DAY OF **6/19/2016**

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

This drilling or abandonment authority was granted based upon the certifications made by the above-named Driller in the notice of intent to drill or abandon. Those certifications, along with any variances granted, are listed below. By drilling or abandoning the well pursuant to this authorization, the above-named driller acknowledges the accuracy of the driller certifications. If the certifications are in error, this authorization is invalid and driller must contact the Department of Water Resource's NOI Section in writing at the addres above to correct.

Variance(s) Granted To Driller: **None**

Certification(s) Made By Driller:

- þ By checking this box, I certify that I have all necessary Registrar of Contractor (ROC) licenses in all necessary license categories for this drilling or abandonment project and that those licenses are current.
- þ By checking this box, I certify that I have been authorized by the above-named well owner to submit this Notice of Intent on the well owner's behalf.
- þ By checking this box, I certify that I have obtained written certification from the land owner stating that the proposed well site is not within 100 feet of any septic tank system, sewage disposal area, landfill, hazardous waste facility, storage area of hazardous materials or petroleum storage areas and tanks. A copy of the land owner's written certification shall be submitted to ADWR with the Well Driller Report and Well Log or the Well Abandonment Completion Report within 30 days of completion of drilling or abandonment.
- þ By checking this box, I certify that I have received county health authority approval for the proposed well location associated with this NOI application within the past year.
- þ By checking this box, I certify that I shall submit the well site plan, showing written approval and endorsement by the county or local health authority, to ADWR with the Well Driller Report/Log within 30 days of completion of drilling.

By checking this box, I certify that the information above is complete and correct, and that the well shall be

- ☐ drilled or abandoned in compliance with all pertinent statutes and rules, including any special standards that may be required to protect the aquifer or other water sources.
- ☐ By checking this box, I certify that the proposed well's water use meets the criteria of domestic purposes as outlined in the A.R.S. §45-454 and that the water will be used solely for domestic purposes.
- ☐ By checking this box, I certify that this NOI application is not an application to replace, deepen, or modify an existing well.
- ☐ By checking this box, I understand that the Authorization to drill this well DOES NOT constitute or guarantee an approval to use the well for the purpose of withdrawing groundwater for transportation to an Active Management Area (AMA) pursuant to A.R.S. § 45-552, 45-553, 45-554 or 45-555(A) without official prior approval from the Department.
- ☐ I certify the point of use for the water to be pumped from this well is the same ground water basin as this well.

ARIZONA DEPARTMENT OF WATER RESOURCES
Electronic Filing - NOI Report

Phoenix, Arizona

NOI Type: Notice of Intent to Drill, Deepen, Replace or Modify a Well
Well Type: EXEMPT
Date Received at ADWR Website: 6/19/2015

Fee Paid: $100.00 Order Number: -3819

Well Registration Number: 55 - 918329
Number of Wells/Holes: 1 Drilling Authority Expires On: 6/19/2016

Driller's ADWR License Number: 336

Authorized Driller: FLAGSTAFF WELL AND SUPPLY COMPANY, INC.
ROC License Number Entered By Driller: 090846, 58790
Qualifying Party License Categories: A-4, R-53

Well Owner Name: GRANDROTH-RADLOFF REVOCABLE TRUST
Well Owner Address: 101 W. QUARTZ RD
Well Owner City, State - Zip: FLAGSTAFF, AZ - 86005
Well Owner Phone: 928 380-5808

Book: 110 Map:12 Parcel: 013S

Is the Land Owner the same as the Well Owner?: Yes

Well Location: **SE** 1/4 of the **SE** 1/4 of the **SE** 1/4 Section **3** Township **21 N** Range **7 E**

AMA: NOT WITHIN ANY AMA OR INA
County: COCONINO
Contamination Site: NOT IN A REMEDIAL ACTION SITE

Design Pumping Capacity: **<= 35 GPM**

Primary Water Use: **DOMESTIC**
Secondary Water Use(s): **N/A**

Was written approval obtained from the applicable county or local health authority to drill the proposed well?:
Obtained
County Approval Pin: **2088579757**

Is the proposed water use for domestic purposes on <= 5 acres?: **Yes**

Is any portion of the land, on which the well is to be located, within 100 feet of a designated municipal provider's operating water distribution system as shown on the municipal provider's most recent digitized service area map filed by the municipal provider with the director of ADWR. **N/A**

Will the installed pump have a pumping capacity of greater than 35 GPM, or will the well will be used to withdraw greater than 10 Acre Feet per year?: **N/A**

Variance(s) Granted To Driller: **None**

Certification(s) Made By Driller:

- ☐ By checking this box, I certify that I have all necessary Registrar of Contractor (ROC) licenses in all necessary license categories for this drilling or abandonment project and that those licenses are current.
- ☐ By checking this box, I certify that I have been authorized by the above-named well owner to submit this Notice of Intent on the well owner's behalf.
- ☐ By checking this box, I certify that I have obtained written certification from the land owner stating that the proposed well site is not within 100 feet of any septic tank system, sewage disposal area, landfill, hazardous waste facility, storage area of hazardous materials or petroleum storage areas and tanks. A copy of the land owner's written certification shall be submitted to ADWR with the Well Driller Report and Well Log or the Well Abandonment Completion Report within 30 days of completion of drilling or abandonment.
- ☐ By checking this box, I certify that I have received county health authority approval for the proposed well location associated with this NOI application within the past year.
- ☐ By checking this box, I certify that I shall submit the well site plan, showing written approval and endorsement by the county or local health authority, to ADWR with the Well Driller Report/Log within 30 days of completion of drilling.
- ☐ By checking this box, I certify that the information above is complete and correct, and that the well shall be drilled or abandoned in compliance with all pertinent statutes and rules, including any special standards that may be required to protect the aquifer or other water sources.
- ☐ By checking this box, I certify that the proposed well's water use meets the criteria of domestic purposes as outlined in the A.R.S. §45-454 and that the water will be used solely for domestic purposes.
- ☐ By checking this box, I certify that this NOI application is not an application to replace, deepen, or modify an existing well.
- ☐ By checking this box, I understand that the Authorization to drill this well DOES NOT constitute or guarantee an approval to use the well for the purpose of withdrawing groundwater for transportation to an Active Management Area (AMA) pursuant to A.R.S. § 45-552, 45-553, 45-554 or 45-555(A) without official prior approval from the Department.
- ☐ I certify the point of use for the water to be pumped from this well is the same ground water basin as this well.

Arizona Department of Water Resources
Information Management Unit
PO Box 36020 l Phoenix, Arizona 85067-36020
(602) 771-8527 l 602-771-8500

Well Driller Report and Well Log

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

PLEASE PRINT CLEARLY USING BLACK OR BLUE INK

FILE NUMBER
A(21-7) 3 DDD

WELL REGISTRATION NUMBER
55 - 918329

PERMIT NUMBER (IF ISSUED)

SECTION 1. DRILLING AUTHORIZATION

Drilling Firm

Mail To:

NAME: FLAGSTAFF WELL AND SUPPLY COMPANY, INC.	DWR LICENSE NUMBER: 336
ADDRESS: P.O. BOX 22280	TELEPHONE NUMBER: 928-774-8243
CITY / STATE / ZIP: FLAGSTAFF, AZ, 86002-2280	FAX:

SECTION 1. REGISTRY INFORMATION

Well Owner

FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL
GRANDROTH-RADLOFF REVOCABLE TRUST

MAILING ADDRESS
101 W. QUARTZ RD

CITY / STATE / ZIP
FLAGSTAFF, AZ, 86005

CONTACT PERSON NAME AND TITLE

TELEPHONE NUMBER
928 380-5808

FAX

WELL NAME (e.g., MW-1, PZ-3, lot 25 Well, Smith Well, etc.)

Location of Well

WELL LOCATION ADDRESS (IF ANY)

TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE
			1/4	1/4	1/4

LATITUDE			LONGITUDE		
°	'	"N	°	'	"W

METHOD OF LATITUDE/LONGITUDE (CHECK ONE)
☐ USGS Quad Map ☐ Conventional Survey ☐ *GPS: Hand-Held ☐ *GPS: Survey-Grade

LAND SURFACE ELEVATION AT WELL
Feet Above Sea Level

METHOD OF ELEVATION (CHECK ONE)
☐ USGS Quad Map ☐ Conventional Survey ☐ *GPS: Hand-Held ☐ *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	MAP	PARCEL
110	12	013S

SECTION 3. WELL CONSTRUCTION DETAILS

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)

Condition of Well

CHECK ONE
- ☐ Capped
- ☐ Pump Installed

Method of Sealing at Reduction Points

CHECK ONE
- ☐ None
- ☐ Packed
- ☐ Swedged
- ☐ Welded
- ☐ Other (please specify)

Construction Dates

DATE WELL CONSTRUCTION STARTED

DATE WELL CONSTRUCTION COMPLETED

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

DATE

Well Driller Report and Well Log

WELL REGISTRATION NUMBER
55 - 918329

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

Depth

DEPTH OF BORING (Feet Below Land Surface)	DEPTH OF COMPLETED WELL (Feet Below Land Surface)

Water Level Information

STATIC WATER LEVEL (Feet Below Land Surface)	DATE MEASURED	TIME MEASURED	IF FLOWING WELL, METHOD OF FLOW REGULATION
			☐ Valve ☐ Other:

Borehole / Installed Casing

Borehole: DEPTH FROM SURFACE FROM (feet)	Borehole: DEPTH FROM SURFACE TO (feet)	Borehole: BOREHOLE DIAMETER (inches)	Installed Casing: DEPTH FROM SURFACE FROM (feet)	Installed Casing: DEPTH FROM SURFACE TO (feet)	Installed Casing: OUTER (inches)	MATERIAL TYPE (T): STEEL	MATERIAL TYPE (T): PVC	MATERIAL TYPE (T): ABS	MATERIAL TYPE (T): IF OTHER TYPE, DESCRIBE	PERFORATION TYPE (T): BLANK OR NONE	PERFORATION TYPE (T): WIRE WRAP	PERFORATION TYPE (T): SHUTTER SCREEN	PERFORATION TYPE (T): MILLS KNIFE	PERFORATION TYPE (T): SLOTTED	PERFORATION TYPE (T): IF OTHER TYPE, DESCRIBE	SLOT SIZE (inches)

Installed Annular Material

DEPTH FROM SURFACE FROM (feet)	DEPTH FROM SURFACE TO (feet)	ANNULAR MATERIAL TYPE (T): NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE: GROUT	BENTONITE: CHIPS	BENTONITE: PELLETS	IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	FILTER PACK: SAND	FILTER PACK: GRAVEL	FILTER PACK: SIZE

Well Driller Report and Well Log

WELL REGISTRATION NUMBER
55 - 918329

SECTION 5. GEOLOGIC LOG OF WELL

DEPTH FROM SURFACE FROM (feet)	TO (feet)	**Description** Describe material, grain size, color, etc.	Check (T) every interval where water was encountered (if known)

Well Driller Report and Well Log

WELL REGISTRATION NUMBER
55 - 918329

SECTION 6. WELL SITE PLAN			
NAME OF WELL OWNER	COUNTY ASSESSOR'S PARCEL ID NUMBER (MOST RECENT)		
GRANDROTH-RADLOFF REVOCABLE TRUST	BOOK 110	MAP 12	PARCEL 013S

v Please draw the following: (1) the boundaries of property on which the well was located; (2) the well location; (3) the locations of all septic tank systems and sewer systems on the property or within 100 feet of the well location, even if on neighboring properties; and (4) any permanent structures on the property that may aid in locating the well.

v Please indicate the distance between the well location and any septic tank system or sewer system.

						N W E S
						1" = _____ ft

Form 55-55 Instructions

Well Driller Report and Well Log

Introduction

These instructions are a guide to filling out Form DWR 55-55 (Rev. 06/15/2010), entitled "Well Driller Report and Well Log." Please review the instructions prior to completing the form in black or blue ink. Forms may be obtained at any Arizona Department of Water Resources (ADWR) office and at ADWR's web site, http://www.azwater.gov. For information about the form or these instructions, contact Groundwater Permitting & Wells at (602) 771-8500. There is no fee for filing this form.

When Form DWR 55-55 Must be Filed

Within 30 days after completion of the drilling, deepening or modification of a well, the licensed well driller who performed the work must file a Well Driller Report and Log with ADWR. Because the information in the report describes the well as it was actually constructed, and comes from the person who constructed the well, the information is very valuable to ADWR. For that reason, it is very important to fill out the report with the most accurate information possible.

Instructions for Filling out the Form

Well Registration and Permit Numbers

Fill in the registration number of the well and any ADWR permit number associated with the well in the upper right-hand corner of the first page. Also fill in the well registration number in the upper right-hand corner of all other pages so that the well information on those pages can be identified when the pages are separated during computer imaging.

Section 1 - Drilling Authorization

Fill in the name, address, DWR license number and telephone and fax numbers of the drilling firm filing the report.

Section 2 - Registry Information

Well Owner

Fill in the name, mailing address, telephone number and fax number (if available) of the well owner. If the well owner is a corporation, governmental unit or other entity, provide the name of a contact person.

Location of Well

Fill in the following information relating to the location of the well:

- The street address of the property where the well is located. For monitor wells or other wells associated with contaminant investigations or remedial projects, this will usually be the same as the facility address.

- The legal description of the well site. The legal description is the township, range, section, and in decreasing order, the quarters of that section so that the well location falls in a 10-acre block within that section. Normally, the legal description will be the same as that given in the original Notice of Intent to drill the well, but occasionally a more accurate description is discovered after the Notice is filed.

- The latitude and longitude (in degrees-minutes-seconds format) and land surface elevation at the well, and the method used to determine these data. **Please note this information is mandatory.** Use of a Global Positioning System (GPS) receiver is the only method accepted by the Department. The GPS unit should be adjusted to use the NAD-83 datum. Please indicate if the geographic coordinate datum used was NAD-83, and if not, which datum was used.

- The name of the county and the tax assessor's parcel identification number for the land where the well is located. This information can normally be taken from the original Notice of Intent to drill the well, and may also be obtained from the county tax assessor's office. Federal or State land will not have a parcel identification number.

Section 3 - Well Construction Details

Section 3 requires details on the construction of the well. Indicate the drill method by checking the appropriate box. If the drill method is not listed, check the "Other" box and describe the method. To the right of that, indicate the method of well development by checking the

appropriate box. Next, indicate the method of sealing at reduction points. If the method used is not listed, check "Other" and provide a brief explanation. Under *Well Driller Completion Report and Well Log* Form 55-55 Instructions (Rev. 06/2010) Page 2

Condition of Well, indicate whether the well was capped, or a pump was installed, when you left it. Then fill in the date when well construction started, and the date when well construction was completed.

Signature Block

The form must be signed and dated by the qualifying party of the drilling firm.

Section 4 - Well Construction Design (As Built)

Section 4 contains tables to fill in information on the existing borehole, the installed casing and the installed annular material. The tables are broken down by depth interval.

In the first set of boxes, fill in the depth of the boring and the depth of the completed well, as measured in feet below the land surface.

Under **Water Level Information** please indicate the static water level in the well, as measured in feet below the land surface, and the date and time the water level was measured. If the well is a flowing well, include the method by which the artesian flow is regulated.

In the **Borehole** table, fill in the diameter of the borehole in inches, and indicate the depth interval for each change in diameter. In the **Installed Casing** table, fill in the outer diameter of the casing in inches, check the appropriate boxes indicating the type of casing material and the type of perforations, and fill in the slot size of any perforations. Fill in the depth interval for each change in information. Please note that not every interval will be perforated. Check the "Blank or None" box for non-perforated depth intervals. If the type of casing material or perforations is not listed, describe the type in the appropriate box.

In the **Installed Annular Material** table, check the appropriate boxes indicating the type of annular material or filter pack installed at each depth interval. Fill in the size of the filter pack used. Provide the depth interval for each change in information. If the type of annular material is not listed, describe the material in the appropriate box.

Section 5 - Geologic Log of Well

Section 5 requires the geologic or lithologic log of the well. Describe the various units encountered during drilling. Provide as much description as possible. The log description must be broken down by depth intervals below ground surface, and every interval where groundwater, including perched groundwater, was encountered must be checked. If a consulting firm was involved with the well construction, the consultant's lithologic log may be submitted in lieu of completing Section 5.

Section 6 - Well Site Plan

In the boxes at the top of Section 6, fill in the name of the well owner and the county tax assessor's parcel identification number for the land where the well is located. Below that, provide a scale drawing of where the well was actually constructed on the parcel, illustrating the property boundaries, the well location and any structures on the property. The drawing must also show the location of any septic tank or sewer systems on the property or within 100 feet of the well, even if on neighboring property, and the distance between the well and the septic tank or sewer system. The drawing should closely match the drawing on the original Notice of Intent to drill the well, but the purpose of this drawing is to show where the well was actually drilled, especially if the location is different than originally planned. This information will be shared with the county.

Where to File Form

Completed forms may be mailed to ADWR at the following address:

Arizona Department of Water Resources
Groundwater Permitting and Wells
PO Box 36020
Phoenix, AZ 85067-36020

Completed forms may also be submitted to ADWR's main office at 3550 North Central Avenue, Second Floor., Phoenix, AZ 85012.

The completed form must be legible and of good quality when received by ADWR so that it can be scanned into ADWR's permanent records.

ARIZONA DEPARTMENT of WATER RESOURCES
3550 North Central Avenue, Second Floor
Phoenix, AZ 85012
602-771-8500
azwater.gov

June 19, 2015

GRANDROTH-RADLOFF REVOCABLE TRUST
101 W. QUARTZ RD
FLAGSTAFF, AZ 86005

DOUGLAS A. DUCEY
Governor

THOMAS BUSCHATZKE
Director

Registration No. 55- 918329
File Number: A(21-7) 3 DDD

Dear Well Applicant:

Enclosed is a copy of the Notice of Intention to Drill (NOI) a well which you or your driller recently filed with the Department of Water Resources. This letter is to inform you that the Department has approved the NOI and has mailed, or made available for download, a drilling authorization card to your designated well drilling contractor. The driller may not begin drilling until he/she has received the authorization, and must keep it in their possession at the well site during drilling.

Well drilling activities must be completed within one year after the date the NOI was filed with the Department. If drilling is not completed within one year, a new NOI must be filed and authorization from this Department received before proceeding with drilling. If the well cannot be successfully completed as initially intended (dry hole, cave in, lost tools, etc.), the well must be properly abandoned and a Well Abandonment Completion Report must be filed by your driller [as required by A.A.C. R12-15-816(F)].

If you change drillers, you must notify the Department of the new driller's identity on a Request to Change Well Information (form 55-71A). Please ensure that the new driller is licensed by the Department to drill the type of well you require. A new driller may not begin drilling until he/she receives a new drilling authorization card from the Department.

If you find it necessary to change the location of the proposed well(s), you may not proceed with drilling until you file an amended NOI with the Department. An amended drilling authorization card will then be issued to the well drilling contractor, which must be in their possession before drilling begins.

Arizona statute [A.R.S. § 45-600] requires registered well owners to file a Pump Installation Completion Report (form 55-56) with the Department within 30 days after the installation of pumping equipment, if authorized. A blank report is enclosed for your convenience. State statute also requires the driller to file a complete and accurate Well Drillers Report and Well Log (form 55-55) within 30 days after completion of drilling. A blank report form was provided to your driller with the drilling authorization card. You should insist and ensure that all of the required reports are accurately completed and timely filed with the Department.

Please be advised that Arizona statute [A.R.S. § 45-593(C)] requires a registered well owner to notify the Department of a change in ownership of the well and/or information pertaining to the physical characteristics of the well in order to keep this well registration file current and accurate. Any change in well information or a request to change well driller must be filed on a Request to Change Well Information form (form 55-71A) that may be downloaded from the ADWR Internet website at www.azwater.gov.

Sincerely,

Groundwater Permitting and Wells Section

Arizona Department of Water Resources
Information Management Unit
PO Box 36020 , Phoenix, AZ 85067-36020
(602) 771-8527 ▪ 1-800-352-8488

Pump Installation Completion Report

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

** PLEASE PRINT CLEARLY **

FILE NUMBER
A(21-7) 3 DDD
WELL REGISTRATION NUMBER
55 - 918329

SECTION 1. REGISTRY INFORMATION

Well Owner

FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL
GRANDROTH-RADLOFF REVOCABLE TRUST

MAILING ADDRESS
101 W. QUARTZ RD

CITY / STATE / ZIP
FLAGSTAFF, AZ, 86005

CONTACT PERSON NAME AND TITLE

TELEPHONE NUMBER
928 380-5808

FAX

Location of Well

WELL LOCATION ADDRESS (IF ANY)

TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE
			1/4	1/4	1/4

COUNTY ASSESSOR'S PARCEL ID NUMBER (MOST RECENT)

BOOK	MAP	PARCEL
110	12	013S

COUNTY WHERE WELL IS LOCATED

SECTION 2. EQUIPMENT INSTALLED

DATE PUMP INSTALLED

Pump Type

CHECK ONE

- ☐ Air Lift
- ☐ Bucket
- ☐ Centrifugal
- ☐ Jet
- ☐ Piston
- ☐ Rotary
- ☐ Submersible
- ☐ Turbine
- ☐ Other *(Please Specify):*

RATED PUMP CAPACITY
Gallons Per Minute

Pitless Adaptor

CHECK ONE *(SEE INSTRUCTIONS FOR DEFINITION)*

Was a pitless adaptor installed? ☐ Yes ☐ No

IF YES, DEPTH BELOW GROUND LEVEL THE DEVICE WAS INSTALLED
Feet

Power Type

CHECK ONE

- ☐ Diesel Engine
- ☐ Electric Motor
- ☐ Gasoline Engine
- ☐ Hand
- ☐ Natural Gas
- ☐ Windmill
- ☐ Other *(Please Specify):*

HORSE POWER RATING OF MOTOR

SECTION 3. PUMP TEST

Pump Test Data

DATE WELL TESTED

STATIC WATER LEVEL (A)
Feet Below Land Surface

PUMPING WATER LEVEL (B)
Feet Below Land Surface

DRAWDOWN [(B) - (A)]
Feet Below Land Surface

TEST PUMPING RATE
Gallons Per Minute

DURATION OF PUMP TEST (Minimum 4 Hours)
Hours

TOTAL PUMPING LIFT
Feet

FOR FLOWING WELL, MEASURED SHUT IN HEAD ☐ FT ☐ PSI

Method of Discharge Measurement

CHECK ONE

- ☐ Bailer
- ☐ Bucket - Barrel - Stopwatch
- ☐ Current
- ☐ Estimated - Air Lift
- ☐ Gauge
- ☐ Meter
- ☐ Orifice
- ☐ Volume
- ☐ Weir - Flume
- ☐ Other *(Please Specify):*

Method of Measuring Water Level

CHECK ONE

- ☐ Air Line
- ☐ Electric Measuring Line (Sounder)
- ☐ Steel Tape
- ☐ Other *(Please Specify):*

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

DATE

Form 55-56 Instructions

Pump Installation Completion Report

Introduction

These instructions are a guide to filling out Form DWR 55-56 (Rev. 07/20/07), entitled "Pump Installation Completion Report." Please review the instructions prior to completing the form in black or blue ink. Forms may be obtained at any Arizona Department of Water Resources (ADWR) office and at ADWR's Web site, http://www.azwater.gov. For information about the form or these instructions, contact the Supervisor of the Notice of Intent Program at (602) 771-8500. There is no fee for filing this form.

When Form DWR 55-56 Must be Filed

A Pump Installation Completion Report must be filed by the owner of a well within 30 days after a pump is installed in the well. It is recommended that the report be filled out with the assistance of the firm that installed the pump. The information in the report, including where the well is located, who owns the well, and what pump equipment was installed in the well, will be placed in ADWR's database of all wells in Arizona. Because the report will describe conditions in the well as they actually exist, the information is very valuable to ADWR. For that reason, it is very important to fill out the report with the most accurate information possible.

Instructions for Filling out the Form

Well Registration Number

Fill in the registration number of the well in the box in the upper right-hand corner of the form. If this is a new well, the number will be the registration number that ADWR assigned to the well when the Notice of Intent to drill the well was filed.

Section 1 - Registry Information

Well Owner

Fill in the well owner's name, mailing address and telephone and fax numbers. If the well owner is a corporation, governmental unit or other entity, provide the name of a contact person.

Location of Well

Fill in the following information relating to the location of the well:

The street address of the property where the well is located, if the property has a street address.

- The legal description of the well location. The legal description is the township, range, section, and in decreasing order, the quarters of that section so that the well location falls in a 10-acre block within that section. This will usually be the same as the legal description for the well location submitted with the original Notice of Intent to drill the well, but occasionally a more accurate legal description is discovered after the Notice is filed.

- The county tax assessor's parcel identification number for the land where the well is located. This information can normally be taken from the original Notice of Intent to drill the well, and may also be obtained from the county tax assessor's office. Federal or State land will not have a parcel identification number.

- The name of the county where the well is located.

Section 2 - Equipment Installed

Section 2 requires information on the pump equipment installed in the well. In the space in the upper left-hand corner of the section, fill in the date the pump equipment was installed.

Pitless adaptor is defined in Arizona Administrative Code R12-15-801(21), as a commercially manufactured watertight unit or device designed for attachment to a steel well casing which permits discharge from the well below the land surface and allows access into the well casing while preventing contaminants from entering the well. In the box labeled **Pitless Adaptor,** check yes if a pitless adaptor was installed and note at what depth below grade the device was installed.

In the block labeled **Pump Type**, check the appropriate box indicating the type of pump installed. If the type of pump is not listed, check "Other" and describe the pump type. Below that block, fill in the rated pump capacity of the pump in gallons per minute.

In the block labeled **Power Type**, check the appropriate box indicating the type of power the pump uses. If the type of power is not listed, check "Other" and describe the power type. Below that block, fill in the horsepower rating of the

motor. This information can be obtained from the firm that installed the pump.

Section 3 - Pump Test

Section 3 contains three blocks for providing information on the results of the pumping test that is required to be performed on the well and pump. In the block labeled **Pump Test Data**, fill in the following information:

- The date the well was tested.
- The static water level in the well. This is the water level in the well immediately prior to the pumping test, as measured in feet below the land surface.
- The pumping water level. This is the water level in the well immediately after the pump was operated for at least four hours, as measured in feet below the land surface.
- Drawdown. This is the difference between the pumping water level and the static water level.
- The pumping rate during the test, as measured in gallons per minute.
- The duration of the pumping test, which must be at least four hours of continuous operation.
- The total pumping lift, if known, as measured in feet.
- If the well is a flowing or artesian well, the shut-in pressure head in feet or pounds per square inch.

In the block labeled **Method of Discharge Measurement**, check the appropriate box indicating how the discharge was measured during the pumping test. If the method of measurement is not listed, check "Other" and provide a brief description of the method.

In the block labeled **Method of Measuring Water Level**, check the appropriate box indicating the method by which the water levels were measured during the pumping test. If the method used is not listed, check "Other" and provide a brief description of the method.

Signature Block

The form must be signed and dated by the well owner.

Where to File Form

Completed forms may be mailed to ADWR at the following address:

Arizona Department of Water Resources
Groundwater Permitting and Wells
PO Box 36020
Phoenix, AZ 85067-36020

Completed forms may also be submitted to ADWR's main office in Phoenix at 3550 North Central Avenue, Second Floor Phoenix, Az. 85012.

The completed form must be legible and of good quality when received by ADWR so that it can be scanned into ADWR's permanent records.

ARIZONA DEPARTMENT of WATER RESOURCES
3550 North Central Avenue, Second Floor
Engineering and Permits Division
Phoenix, AZ 85012
602-771-8500

NOTICE TO WELL DRILLERS

This is a reminder that a valid drill card be present for the drilling of each and every well constructed on a site.* The problem seems to occur during the construction of a well when an unexpected problem occurs. Either the hole collapses, the hole is dry, a drill bit is lost and can't be recovered, or any number of other situations where the driller feels that he needs to move over and start another well. If you encounter this type of scenario, please be aware drillers do not have the authority to start another well without first obtaining drilling authority for the new well. Please note the following statutes and regulations pertaining to well drilling and construction:

ARIZONA REVISED STATUTE (A.R.S.)

A.R.S. § 45-592.A.

A person may construct, replace or deepen a well in this state only pursuant to this article and section 45-834.01. The drilling of a well may not begin until all requirements of this article and section 45-834.01, as applicable, are met.

***

A.R.S. § 594.A.

The director shall adopt rules establishing construction standards for new wells and replacement wells, the deepening and abandonment of existing wells and the capping of open wells.

***

A.R.S. § 600.A

A well driller shall maintain a complete and accurate log of each well drilled.

ARIZONA ADMINISTRATIVE CODE (A.A.C.)

A.A.C. R12-15-803.A.
A person shall not drill or abandon a well, or cause a well to be drilled or abandoned, in a manner which is not in compliance with A.R.S. Title 45, Chapter 2, Article 10, and the rules adopted thereunder.

****

A.A.C. R12-15-810.A.
A well drilling contractor or single well licensee may commence drilling a well only if the well drilling contractor or licensee has possession of a drilling card at the well site issued by the Director in the name of the well drilling contractor or licensee, authorizing the drilling of the specific well in the specific location.

****

A.A.C. R12-15-816.F.
In the course of drilling a new well, the well may be abandoned without first filing a notice of intent to abandon and without an abandonment card.

*** THIS REQUIREMENT DOES NOT PERTAIN TO THE DRILLING OF MINERAL EXPLORATION, GEOTECHNICAL OR HEAT PUMP BOREHOLES**

Arizona Department of Water Resources
Groundwater Permitting and Wells Section
PO Box 36020 , Phoenix, AZ 85067-36020
(602) 771-8527 ▪ 1-800-352-8488
www.azwater.gov

Landowner Authorization to Drill or Abandon a Well on Landowner's Parcel

Landowner Authorization to Drill or Abandon a Well by a Third Party on Landowner's Parcel Pursuant to A.R.S. § 45-596 and A.A.C. R12-15-809

FILE NUMBER
A(21-7) 3 DDD
WELL REGISTRATION NUMBER
55 - 918329

The Arizona Department of Water Resources requires a well driller or well owner to obtain written permission from the owner of the land on which they intend to drill or abandon a well. Landowners, or their designated representative, must authorize the well to be drilled or abandoned with their signature on the Notice of Intent or on this form, to be attached to the Notice of Intent form.

PARCEL ADDRESS _____

COUNTY PARCEL ID 110 - 12 - 013S COUNTY COCONINO
BOOK MAP PARCEL

In accordance with A.R.S. § 45-496 and A.A.C. R12-15-809, I certify that:

¨ I am the owner of the parcel on which I am giving permission for a well to be ¨ drilled or ¨ abandoned.

¨ I am an authorized representative of the owner of the parcel on which I am giving permission for a well to be ¨ drilled or ¨ abandoned.

SIGNATURE	
TYPE OR PRINT NAME OF LANDOWNER / RESPRESENTATIVE	TITLE
SIGNATURE	DATE SIGNED