

David G. Christiana

From: Karen A. Fisher
Sent: Friday, November 21, 2014 3:14 PM
To: David G. Christiana
Subject: RE: Imaged Record Issue

Hi. I'm looking into this. I'll get back to you soon.

-Karen

From: David G. Christiana
Sent: Wednesday, November 19, 2014 4:31 PM
To: Karen A. Fisher
Subject: Imaged Record Issue

Karen,

We have a perplexing problem. Well 55-212651 and 55-216096 both point to the pdf 113.pdf (which is actually 55-212651). They have different meta-data.

212651
113.pdf
WebRegDoc 335974
Batch 175 Collection 1068

216096
113.pdf
WebRegDoc 315425
Batch 182 Collection 816

I don't know where the NOI and other paperwork are for 55-216096. Can you take a look and see if you can unravel the "mystery"?

Dave



ARIZONA DEPARTMENT OF WATER RESOURCES
 Information Management Unit
 P.O. Box 33589, Phoenix, Arizona 85067-3589
 (602) 771-8527 * (800) 352-8488
 www.water.az.gov

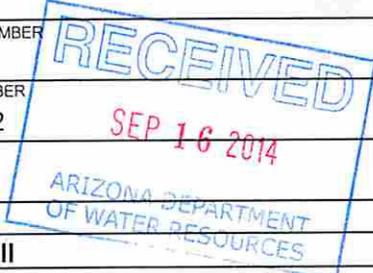
Well Driller Report and Well Log

FILE NUMBER
D(3-7) 34 CCD
 WELL REGISTRATION NUMBER
55-216096
 PERMIT NUMBER (IF ISSUED)

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

**** PLEASE PRINT CLEARLY ****

SECTION 1. DRILLING AUTHORIZATION							
Mail To:	Drilling Firm						
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">NAME J.T. DUNGAN DRILLING COMPANY</td> <td style="width: 50%;">DWR LICENSE NUMBER 369</td> </tr> <tr> <td>ADDRESS 1004 CEDAR AVENUE</td> <td>TELEPHONE NUMBER 480-984-5342</td> </tr> <tr> <td>CITY/STATE/ZIP MIAMI, AZ 85539-1215</td> <td>FAX</td> </tr> </table>	NAME J.T. DUNGAN DRILLING COMPANY	DWR LICENSE NUMBER 369	ADDRESS 1004 CEDAR AVENUE	TELEPHONE NUMBER 480-984-5342	CITY/STATE/ZIP MIAMI, AZ 85539-1215	FAX
	NAME J.T. DUNGAN DRILLING COMPANY	DWR LICENSE NUMBER 369					
	ADDRESS 1004 CEDAR AVENUE	TELEPHONE NUMBER 480-984-5342					
CITY/STATE/ZIP MIAMI, AZ 85539-1215	FAX						



SECTION 2. REGISTRY INFORMATION													
Well Owner	Location of Well												
FULL NAME OF COMPANY, ORGANIZATION OR INDIVIDUAL ANTONIO & TINA ALVARADO	WELL LOCATION ADDRESS (IF ANY)												
MAILING ADDRESS 5463 W WILMA RD	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>TOWNSHIP (N/S) 03S</td> <td>RANGE (E/W) 07E</td> <td>SECTION 34</td> <td>160 ACRE SW 1/4</td> <td>40 ACRE SW 1/4</td> <td>10 ACRE SE 1/4</td> </tr> <tr> <td colspan="2">CITY / STATE / ZIP QUEEN CREEK, AZ 85242</td> <td>LATITUDE 33° 7' 14.64" N</td> <td colspan="3">LONGITUDE 111° 37' 29.74" W</td> </tr> </table>	TOWNSHIP (N/S) 03S	RANGE (E/W) 07E	SECTION 34	160 ACRE SW 1/4	40 ACRE SW 1/4	10 ACRE SE 1/4	CITY / STATE / ZIP QUEEN CREEK, AZ 85242		LATITUDE 33° 7' 14.64" N	LONGITUDE 111° 37' 29.74" W		
TOWNSHIP (N/S) 03S	RANGE (E/W) 07E	SECTION 34	160 ACRE SW 1/4	40 ACRE SW 1/4	10 ACRE SE 1/4								
CITY / STATE / ZIP QUEEN CREEK, AZ 85242		LATITUDE 33° 7' 14.64" N	LONGITUDE 111° 37' 29.74" W										
CONTACT PERSON NAME AND TITLE	METHOD OF LATITUDE / LONGITUDE (CHECK ONE) <input checked="" type="checkbox"/> *GPS: Hand-Held <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade												
TELEPHONE NUMBER 480-695-5374	FAX												
LAND SURFACE ELEVATION AT WELL 1566.6	Feet Above Sea Level												
WELL NAME (e.g., MW-1, PZ-3, Lot 25 Well, Smith Well, etc.)	METHOD OF ELEVATION (CHECK ONE) <input checked="" type="checkbox"/> *GPS: Hand-Held <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade												
*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (CHECK ONE) <input checked="" type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):													
COUNTY PINAL	ASSESSOR'S PARCEL ID NUMBER <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>BOOK 509</td> <td>MAP 68</td> <td>PARCEL 048</td> </tr> </table>	BOOK 509	MAP 68	PARCEL 048									
BOOK 509	MAP 68	PARCEL 048											

SECTION 3. WELL CONSTRUCTION DETAILS		
Drill Method	Method of Well Development	Method of Sealing at Reduction Points
CHECK ONE <input checked="" type="checkbox"/> Air Rotary <input type="checkbox"/> Bored or Augered <input type="checkbox"/> Cable Tool <input type="checkbox"/> Dual Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Reverse Circulation <input type="checkbox"/> Driven <input type="checkbox"/> Jetted <input type="checkbox"/> Air Percussion / Odex Tubing <input type="checkbox"/> Other (please specify)	CHECK ONE <input checked="" type="checkbox"/> Airlift <input type="checkbox"/> Bail <input type="checkbox"/> Surge Back <input type="checkbox"/> Surge Pump <input type="checkbox"/> Other (please specify)	CHECK ONE <input checked="" type="checkbox"/> None <input type="checkbox"/> Packed <input type="checkbox"/> Swedged <input type="checkbox"/> Welded <input type="checkbox"/> Other (please specify)
	Condition of Well	Construction Dates
	CHECK ONE <input type="checkbox"/> Capped <input checked="" type="checkbox"/> Pump Installed	DATE WELL CONSTRUCTION STARTED 8-23-07 DATE WELL CONSTRUCTION COMPLETED 9-5-07

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

DRILLING FIRM <i>Dungan Drilling</i>	SIGNATURE OF QUALIFYING PARTY <i>[Signature]</i>	DATE 10-20-07
---	---	------------------

SECTION 6. WELL SITE PLAN			
NAME OF WELL OWNER	COUNTY	ASSESSOR'S PARCEL ID NUMBER	
ANTONIO & TINA ALVARADO	BOOK	509	MAP 68 PARCEL 048

- ◆ Please draw the following: (1) the boundaries of property on which the well was located; (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.
- ◆ Please indicate the distance between the well location and any septic tank system or sewer system.

1" = _____ ft

SAME AS DIAGRAM PROPOSED

WILMA RD



VACANT PARCEL
NO WELL
NO SEPTIC

615.0

WELL REGISTRY # 55-216096
FILE (LOCATION) NUMBER: D (3-7) 34CCD

240.0

wash

145.0000"

septic

15'

136.7802"

well

Drinking

82.0117"

garage

Home

20' x 22'

20' x 22'

40.0000"

20.0'

12.0000"

359.8234"

225'

AUG 13 2007

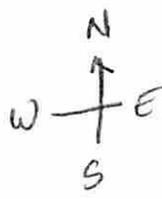
WATER MGMT

RECEIVED

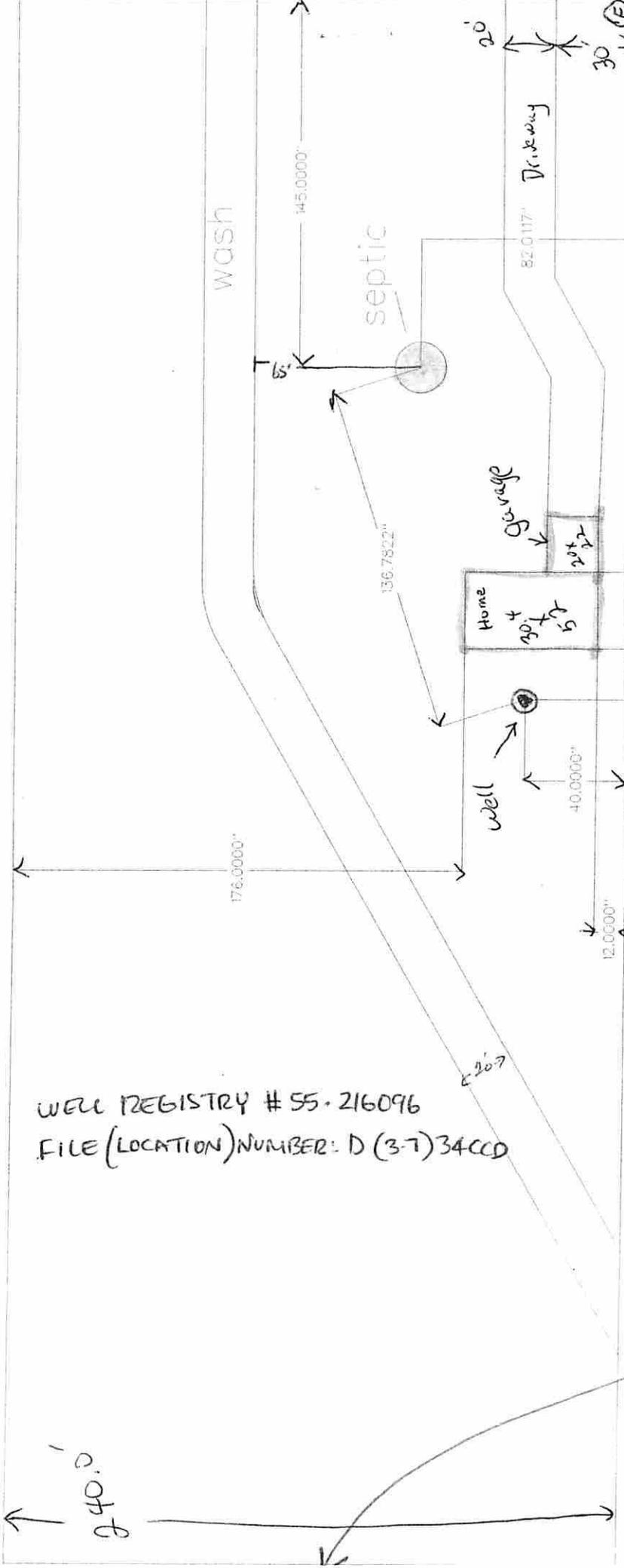
Electric 216096

VACANT PARCEL

NO WELL
NO SEPTIC



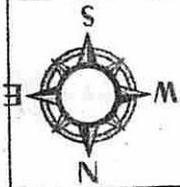
@ Back
VACANT PARCEL
NO WELL
NO SEPTIC



WELL REGISTRATION NUMBER 55-216094

WELL SITE PLAN
 NAME OF WELL OWNER: ALVA RAYNO - TRIP'S ATTORNEY
 COUNTY ASSESSOR'S PARCEL ID NUMBER: 48
 MAP: 509
 PARCEL: 04801

- 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.

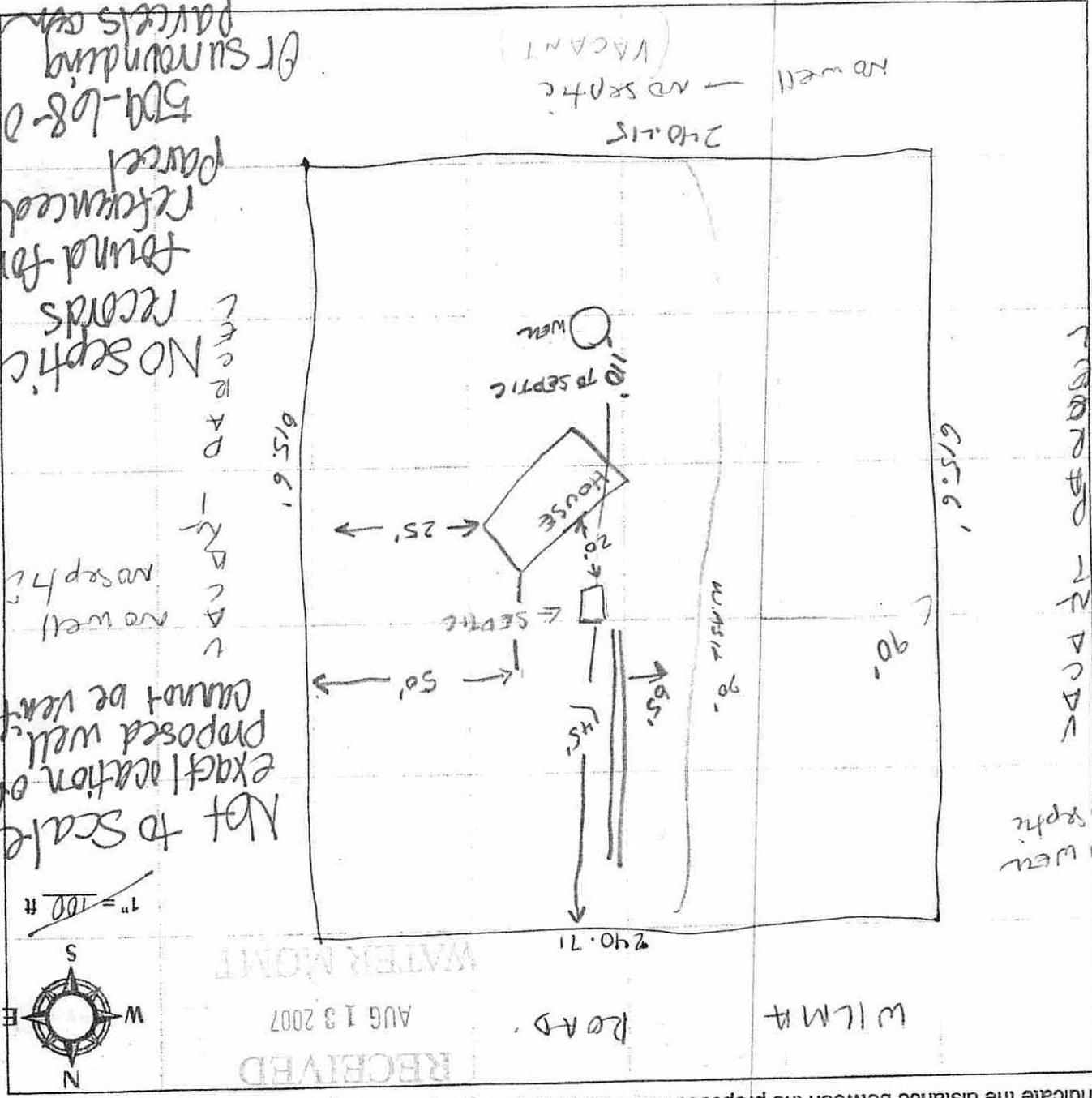


1" = 100 ft

Not to scale
 exact location of
 proposed well
 cannot be verified

NO well
 NO septic

NO septic
 records
 found for
 parcel
 509-68-048
 or surrounding
 parcels on



RECEIVED
 AUG 13 2007
 WATER MOUNT

Official County or Local Seal or Stamp

COUNTY OR LOCAL AUTHORITY NAME AND TITLE: Doris M. [unclear]
 COUNTY OR LOCAL AUTHORITY SIGNATURE: [unclear]
 TELEPHONE NUMBER: 530-266-6633
 DATE: 7-11-07

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

JUL 19 2007