

Run Date: 02/26/2019

AZ DEPARTMENT OF WATER RESOURCES

WELL REGISTRY REPORT - WELLS55

Location B 18.0 18.0 3 A D A **Well Reg.No** 55 - 563937 **AMA** NOT WITHIN ANY AMA OR INA

Registered Name JOHANNES & CECILIA NOWAK TRUST, 9/3/99
PAUL & SUSAN HEALEY
2816 RICHMAR AVE.
HENDERSON NV 89074

File Type NEW WELLS (INTENTS OR APPLICATIONS)
Application/Issue Date 07/11/1997

Owner OWNER
Driller No. 35
Driller Name CAMPBELL'S DRILLING, INC.
Driller Phone
County MOHAVE
Parcel No. 208-30-013
Intended Capacity GPM 100.00

Well Type NON-EXEMPT
SubBasin SACRAMENTO VALLEY
Watershed COLORADO RIVER
Registered Water Uses IRRIGATION
Registered Well Uses WATER PRODUCTION
Discharge Method BUCKET - BARREL - STOPWATCH
Power OTHER

Well Depth 660.00 **Case Diam** 6.00 **Tested Cap** 49.00
Pump Cap. 45.00 **Case Depth** 660.00 **CRT** X
Draw Down 21.00 **Water Level** 460.00 **Log** X
Acres Irrig 150.00 **Finish** STEEL - PERFORATED OR SLOTTED CASING

Contamination Site: NO - NOT IN ANY REMEDIAL ACTION SITE

Tribe: Not in a tribal zone

Comments Added parcel 208-30-013 per owner.

Current Action

2/26/2019 856 CHANGE OF BOOK/MAP/PARCEL DATA
Action Comment: agt

Action History

2/26/2019 860 CHANGE OF WELL OWNERSHIP
Action Comment: agt
6/23/1998 805 PUMP INSTALLATION COMPLETION REPORT RECEIVED/ENTERED
Action Comment:
10/27/1997 750 WELL DRILLER REPORT AND WELL LOG RECEIVED/ENTERED
Action Comment:

RECEIVED



Arizona Department of Water Resources
Groundwater Permitting and Wells Section
P.O. Box 36020 Phoenix, Arizona 85067-6020
Telephone (602) 771-8527 • www.azwater.gov

FEB 19 2019

**REQUEST TO CHANGE
WELL INFORMATION**

A PERSON TO WHOM A WELL IS REGISTERED MUST NOTIFY THE ARIZONA DEPARTMENT 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 WELL REGISTRATION RECORDS CURRENT AND ACCURATE. [PURSUANT TO ARIZONA REVISED STATUTES (A.R.S.) § 45-593 (C)]

****PLEASE PRINT CLEARLY**

NEED HELP? CALL (602) 771-8527

SECTION 1. REQUIRED FILING FEE AND DOCUMENTATION. (Make checks payable to ADWR)

YOU MUST INCLUDE THE FOLLOWING THREE ITEMS WITH THIS APPLICATION:

Failure to include these items may result in application being returned.

- FILING FEE OF \$30.00** (PURSUANT TO A.R.S. § 45-113 AND ARIZONA ADMINISTRATIVE CODE RULE 12-15-104).
- LEGAL PROOF OF OWNERSHIP** SHOWING LAND OWNERSHIP IN THE NAME OF THE NEW OWNER OF THE LAND WHERE THE WELL IS LOCATED. LEGAL PROOF OF OWNERSHIP INCLUDES, BUT IS NOT LIMITED TO, A RECORDED DEED, OBTAINED FROM THE RECORDER'S OFFICE OF THE COUNTY IN WHICH THE LAND IS LOCATED, COURT ORDER, AGREEMENT OR OTHER LEGAL PROOF THAT DEMONSTRATES OWNERSHIP.
- COPY OF COUNTY ASSESSOR MAP** THAT SHOWS WHERE THE WELL IS LOCATED ON YOUR PARCEL. A COUNTY ASSESSOR MAP CAN BE OBTAINED FROM THE ASSESSOR'S OFFICE OF THE COUNTY IN WHICH THE WELL IS LOCATED.

SECTION 2. REGISTRY INFORMATION

(For Dept Use Only) FILE No.

WELL REGISTRATION NUMBER: 55- 563937	WELL LOCATION ADDRESS (IF ANY) / OR CROSS STREETS Township 18 N, Range 18 W, Section 3
COUNTY ASSESSOR'S PARCEL ID NUMBER: BOOK 208 MAP 30 PARCEL 013	COUNTY WHERE WELL IS LOCATED: Mohave

SECTION 3. STATEMENT OF CHANGE OF WELL OWNERSHIP

FEE \$30.00

Previous Well Owner	New Well Owner	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL James A. & Ruth K. Simpson	FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Johannes & Cecilia Nowak Trust (9/3/99), Paul & Susan Healey	
MAILING ADDRESS P.O. Box 4419	MAILING ADDRESS 2816 Richmar Ave.	
CITY / STATE / ZIP CODE Kingman, AZ 86402	CITY / STATE / ZIP CODE Henderson, NV 89074-6414	
CONTACT PERSON NAME AND TITLE James or Ruth Simpson	CONTACT PERSON NAME AND TITLE Cecilia or Johannes Nowak, Owner	
TELEPHONE NUMBER 928 753 1159	TELEPHONE NUMBER 7028965148	EMAIL jandcnowak@aol.com

SECTION 4. CHANGE OF WELL INFORMATION: (CHANGE OF ADDRESS, LEGAL LOCATION, G.P.S. OR PARCEL NUMBER) PROVIDE A NARRATIVE SUMMARY AND ATTACH ANY DRAWINGS, MAPS OR DIAGRAMS THAT WOULD CLARIFY THE CHANGE. NOTE: APPLIES ONLY TO WELLS THAT HAVE **ALREADY BEEN DRILLED**. FOR CHANGING INFORMATION ON A PROPOSED WELL, AN **AMENDED NOTICE OF INTENT TO DRILL A WELL** FORM MUST BE FILED. FOR CHANGE OF DRILLER, A **CHANGE OF DRILLER** FORM MUST BE FILED.

NO FEE

REQUESTED CHANGES: This is to update the new land owners of this parcel.

SECTION 5. WELL OWNER SIGNATURE (OR AUTHORIZED AGENT)

I HEREBY CERTIFY that I have included the filing fee & required documentation, and the above statements are true to the best of my knowledge & belief:

TYPE OR PRINT NAME: Cecilia Nowak, et al. TITLE: owner

SIGNATURE: Cecilia Nowak, Trustee DATE: 2/11/19

Parcel Number: 208-30-013

Owner: NOWAK JOHANNES & CECILIA TRUSTEES 90

Ownership Type:

Mailing Address: 2816 RICHMAR AVE, HENDERSON, NV 890746414

Site Address:

	Previous Year	Current Year	Future Year
Tax Year	2018	2019	2020
Tax Area	0400	0400	0400
Land Value	\$53,353	\$45,350	\$45,350
Improvement Value	\$0	\$0	\$0
Full Cash Value	\$53,353	\$45,350	\$45,350
Assessed Full Cash Value	\$8,003	\$6,803	\$6,803
Limited Valued	\$25,590	\$26,870	\$28,213
Assessed Limited Value	\$3,839	\$4,030	\$4,232
Value Method	Market	Market	Market
Exempt Amount	\$0	\$0	\$0
Exempt Type			
Assessor Use Code	0011-VL-RES-URBAN SUBDIVIDED	0011-VL-RES-URBAN SUBDIVIDED	0011-VL-RES-URBAN SUBDIVIDED
Assessment Ratio	15.0	15.0	15.0
Property Class	02R	02R	02R

Description Information

Parcel Size	116.04 acres
Township	18N
Range	18W
Section	3

NE4 EXC NE4 NE4 CONT 116.04 AC M/L

Improvement Data

Year	Description	Construction Type	Year Build	Stories	SF	Imp #
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Last Sale Information

Sale Price	\$327,000
Sale Date	06/17/2005
Recorded Instr Type	OT
Fee Number	2005065930

Book and Page Data

Book	5665
Page	985

Sales History

Owner	Sale Date	Book Type	Page	Quality	Improvements	Sale Price
SIMPSON JAMES & RUTH TRUSTEES	19950609	2578	309	U	V	0
WOODS TERRY T	19950608	2578	308	U	V	0

Owner	Sale Date	Book Type	Page	Quality	Improvements	Sale Price
SIMPSON JAMES A & RUTH K JT	19781200	512	568	U	V	0

Tax Parcel Candidate Maps

Candidate Map

01 208-30-013

SA

INDEXED

MICROFILMED

Recorded at the request of:
Chicago Title Insurance Company



2005065930 BK 5665 PG 985
OFFICIAL RECORDS OF MOHAVE COUNTY
JOAN MC CALL, MOHAVE COUNTY RECORDER
06/17/2005 07:55A PAGE 1 OF 5
CHICAGO TITLE INS CO
RECORDING FEE 16.00

when recorded mail to:

JOHANNES G.L. NOWAK
CECILIA N. NOWAK
2816 RICHMAR AVE.
HENDERSON, NV ~~89034-6414~~
89074-6414

01027897-SSK

Warranty Deed

For the consideration of Ten Dollars, and other valuable considerations, I or we,

DONALD G. SIMPSON, Trustee of THE JAMES A. SIMPSON AND RUTH K. SIMPSON REVOCABLE TRUST AGREEMENT, dated June 7, 1995

do/does hereby convey to

JOHANNES G.L. NOWAK and CECILIA N. NOWAK, as Trustees UDT Dated September 3, 1999, as to an undivided 90% interest AND PAUL HEALEY and SUSAN HEALEY, Husband and Wife, as Joint Tenants with Right of Survivorship, as to an undivided 10% interest AS TENANTS IN COMMON

the following real property situated in **Mohave** County, Arizona with title being conveyed to the Grantee as set forth in acceptance attached hereto by the Grantee:

See Exhibit A attached hereto and made a part hereof.

Pursuant to A.R.S. 33-404, the names and addresses of the Beneficiaries of the above mentioned trusts are shown on trust disclosure attached hereto and by reference made a part of.

SUBJECT TO: Current taxes and other assessments, reservations in patents and all easements, rights of way, covenants, conditions and restrictions as may appear of record.

And I or we do warrant the title against all persons whomsoever, subject to the matters set forth above.

Dated: JUNE 7, 2005

SEE ACCEPTANCE OF JOINT TENANCY
ATTACHED HERETO AND BY REFERENCE MADE
A PART OF AS TO AN UNDIVIDED 10% INTEREST

**THE JAMES A. SIMPSON AND RUTH K. SIMPSON
REVOCABLE TRUST AGREEMENT, dated June 7,
1995**



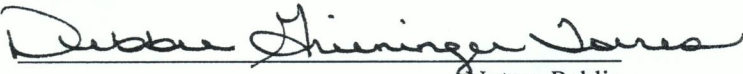
DONALD G. SIMPSON, Trustee

STATE OF ARIZONA

County of maricopa

} ss

This instrument was acknowledged before me this 10th
day of June, 2005 by **DONALD G.
SIMPSON**



Notary Public

My commission expires: May 19, 2007



Exhibit A

PARCEL NO. 1:

Government Lots 1 and 2, and the South half of the Northeast quarter (S1/2 NE1/4) of Section 3, Township 18 North, Range 18 West of the Gila and Salt River Base and Meridian, Mohave County, Arizona.

EXCEPT all oil, gas, coal and minerals as reserved in instrument recorded in Book 92 of Deeds, page 166.

AND

PARCEL NO. 3:

The Northeast quarter of the Southwest quarter (NE1/4 SW1/4) of Section 3, Township 18 North, Range 18 West of the Gila and Salt River Base and Meridian, Mohave County, Arizona.

EXCEPT all oil, gas, coal and minerals as reserved in instrument recorded in Book 92 of Deeds, page 166.



55-563937

SENE

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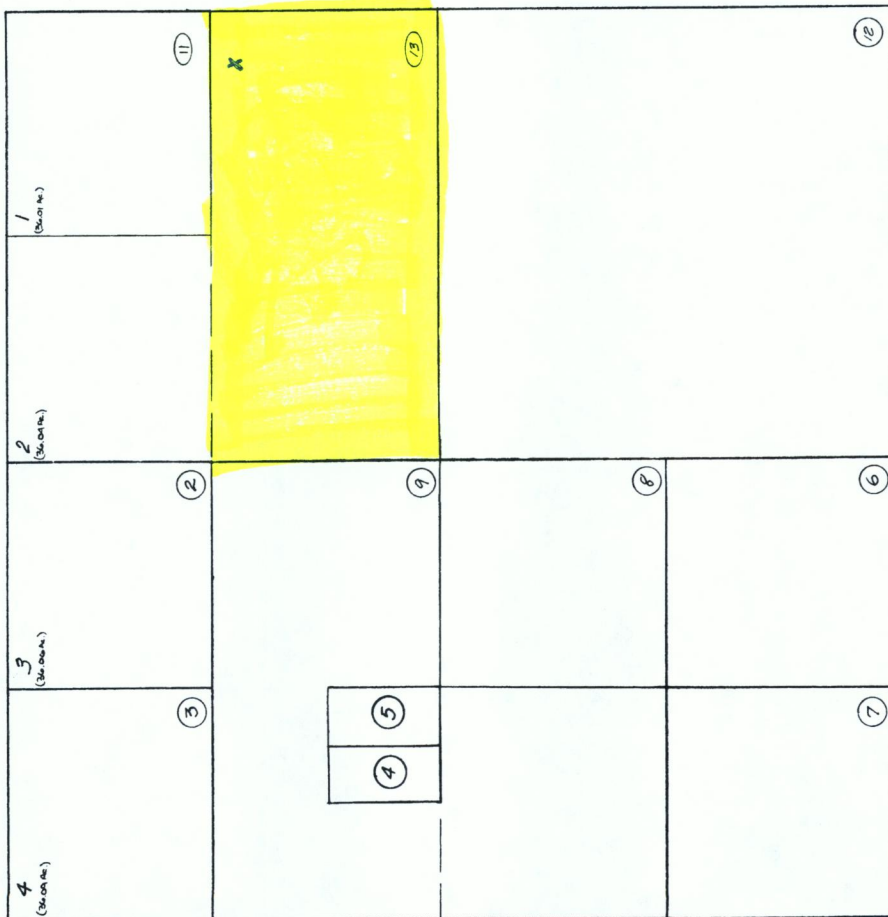
Google Earth
Earth Point

Imagery Date: 6/15/2017 34°58'36.24" N - 114°10'36.71" W elev 2113 ft eye alt 4802 ft

TOWNSHIP 18 N RANGE 18 W
SECTION 3

BOOK 208

MAP 30
CODE 0400



SCALE 600

MOHAVE COUNTY ASSESSOR
1963

18N-18W-3

APRIL 11, 1973

Arizona Department of Water Resources

1110 West Washington Street, Suite 310
Phoenix AZ 85007

Customer:

JOHANNES G L NOWAK TTEE
CECILIA N NOWAK TTEE
2816 RICHMAR AVE
HENDERSON, NV 89074-6414

Receipt #: 19-64304
Office: MAIN OFFICE
Receipt Date: 02/19/2019
Sale Type: IN_PERSON
Cashier: WRSYM

Item No.	Function Code	AOBJ	Description	Ref ID	Qty	Unit Price	Ext Price
81213	WRFREV	4439-TT	Change of Ownership/Change of Well Information/Well Assignment	563937	1	30.00	30.00
RECEIPT TOTAL:							30.00

Payment type: CHECK

Amount Paid: \$30.00

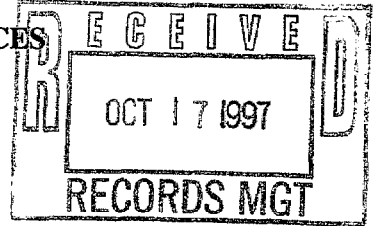
Payment Received Date: 02/19/2019

Notes: FROM TTA.

Check # 3184

ARIZONA DEPARTMENT OF WATER RESOURCES

500 North Third Street
Phoenix, Arizona 85004



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. CAMPBELLS DRILLING, INC.
PO BOX 3019
WICKENBURG AZ 85358-3019

2. Owner Name: JAMES A. & RUTH SIMPSON
Address: BOX 4479 KINGMAN, AZ. 86402
City State Zip

3. Location: 18 N. N/S 18 W. E/W 3 1/4 NE 1/4 SE 1/4 NE
Township Range Section 10-acre 40-acre 160-acre

4. Well Registration No. 55-563937 (Required)
5. Permit No. _____ (If issued)

DESCRIPTION OF WELL

- 6. Total depth of hole 660' ft.
- 7. Type of casing STEEL
- 8. Diameter and length of casing 8" in. from 0' to 20', 6" in from 0' to 660'
- 9. Method of sealing at reduction points CEMENTED
- 10. Perforated from 500' to 660', from _____ to _____ from _____ to _____
- 11. Size of cuts 3/16 x 2 1/2 Number of cuts per foot 12
- 12. If screen was installed: Length _____ ft. Diam _____ in. Type _____
- 13. Method of construction DRILLED
(drilled, dug, driven, bored, jetted, etc)
- 14. Date started OCTOBER 12 1997
Month Day Year
- 15. Date completed OCTOBER 14 1997
Month Day Year
- 16. Depth to water 460' 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: ESTIMATED 65 GPM.

DO NOT WRITE IN THIS SPACE
OFFICE RECORD

Registration No. 55-563937
File No. B(18-18)3 ADA
Received _____ By _____
Entered _____ By _____

OCT 27 1997

LOG OF WELL

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

From (feet)	To (feet)	Description of formation material
0'	480'	CLAY AND SMALL ROCK
480'	660'	CONGLOMERATE.

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

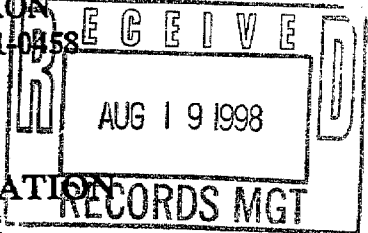
Driller Name: CHARLES E. CAMPBELL

P.O. BOX 3019

Street WICKENBUG, AZ. 85358 520-684-7546

City Charles E. Campbell State Zip 10/15/97 Phone No.
Signature of Driller Date

ARIZONA DEPARTMENT OF WATER RESOURCES
 GROUNDWATER MANAGEMENT SUPPORT SECTION
 MAIL TO: P.O. BOX 458 - PHOENIX, ARIZONA 85001-0458
 500 North Third Street, Phoenix, Arizona 85004-3903
 Phone (602) 417-2470



REQUEST FORM TO CHANGE WELL INFORMATION
 OWNERSHIP * DRILLER * VARIANCE

Please complete the appropriate section of this request form and return to P.O. Box 458, Phoenix, Arizona 85001-0458 or hand deliver to the above address with applicable fee. **NOTE:** A.R.S. §45-593.C requires that the Department be notified of change of well ownership and that the new owner is required to keep the Department's Well Registration records current and accurate. Well data and ownership changes must be submitted within thirty days after changes take place.

SAVE THIS FORM TO REPORT FUTURE CHANGES IN OWNERSHIP, CHANGES IN ADDRESS, OR CHANGE IN WELL DATA SUCH AS PUMP CAPACITY, CORRECTION OF LEGAL DESCRIPTION CHANGE OF WELL DRILLER AND AMENDING INFORMATION PREVIOUSLY FILED.

1. CHANGE OF WELL INFORMATION: (NO FEE REQUIRED)

NOTE: If the location of the proposed well changes after drilling authority has been issued, attach a \$10.00 reissue fee for each well.

WELL REGISTRATION NO. 55- 563937 FILE NO: B(18-18)3 ADA

If known, I/We request the following well information be changed: Add to item 8 (Other uses & location) TRANSPORT WATER FOR CONSTRUCTION PURPOSES.

Date 10 Aug 1998 Signature of Current Well Owner James A Simpson

2. STATEMENT OF CHANGE OF WELL OWNERSHIP: (\$10.00 FEE REQUIRED)

NOTE: If this change consists of more than one well and the names are common: attach a \$10.00 fee. Otherwise, each well requires a separate fee of \$10.00.

I, _____, state that I am the Previous/New Owner of the well described below:

_____ 1/4 _____ 1/4 _____ 1/4 of Section _____ Township _____ Range _____
 10 Acre 40 Acre 160 Acre

Assessor's tax parcel number of the parcel on which the well is located: Book _____ Map _____ Parcel _____

Well Registration No. 55- _____ File No. _____ (if known)

PRINT Previous Owner's Name _____

PRINT New Owner's Name _____

Mailing Address _____

Mailing Address _____

City _____ State _____ Zip _____

City _____ State _____ Zip _____

Telephone Number _____

Telephone Number _____

Signature of Previous/New Well Owner _____ Date _____

ANSWERED NOV 16 1998

ARIZONA DEPARTMENT OF WATER RESOURCES
GROUNDWATER MANAGEMENT SUPPORT SECTION
MAIL TO: P.O. BOX 458 - PHOENIX, ARIZONA 85001-0458
500 North Third Street, Phoenix, Arizona 85004-3903
Phone (602) 417-2470 Fax (602) 417-2422

3. REQUEST TO CHANGE WELL DRILLER \$10.00 FEE REQUIRED FOR EACH WELL

This request must be received by this Department and the Drill Card issued to the new drilling firm prior to the completion of any well.

Well Registration No. 55- _____ File No. _____

Original Well Driller _____

New Well Driller _____

Mailing Address _____

Mailing Address _____

Telephone Number _____

Telephone Number _____

ADWR License Number _____

ADWR License Number _____

R.O.C. License Category _____

R.O.C. License Category _____

Typed or Printed Name of Well Owner _____

Signature of Well Owner _____ D

The fee charge for well ownership and reissue of drill card is authorized by R12-15-151, effective June 30, 1994.

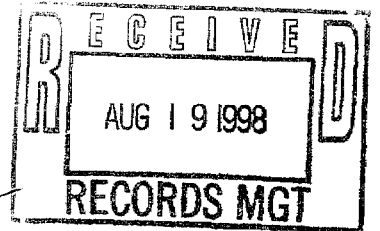
4. REISSUE OF DRILLING AUTHORITY FOR VARIANCE REQUEST: (\$10.00 EACH WELL)

NOTE: If extraordinary or unusual conditions exist, after the initial drilling authority has been issued, the well owner/well driller may request a variance from the provisions of R12-15-811.

WELL REGISTRATION NO. 55- _____ FILE NO: _____

I/WE REQUEST THE FOLLOWING WELL DRILLING AUTHORITY BE REISSUED PER THE ATTACHED VARIANCE REQUEST:

Signature of Well Owner/Well Driller _____ Date _____



10 Aug. 1998

ARIZ DEPT. of WATER RESOURCES
GROUNDWATER MANAGEMENT SUPPORT SECTION
P.O. Box 458
PHOENIX AZ 85001-0458

Gentlemen:

I have been asked to provide water for
A CONTRACTOR TO USE IN LOCAL HIGHWAY
CONSTRUCTION. THAT USE WOULD REQUIRE
TRANSPORTING WATER FROM OUR WELL.

ATTACHED IS "CHANGE OF INFORMATION" FORM FOR
YOUR CONSIDERATION & APPROVAL.

~~James A. Simpson~~
JAMES A. SIMPSON

Box 4419

KINGMAN AZ 86402

SEP 1 1998

**ARIZONA DEPARTMENT OF WATER RESOURCES
GROUNDWATER MANAGEMENT SUPPORT SECTION
MAIL TO: P.O. BOX 458 - PHOENIX, ARIZONA 85001-0458
500 North Third Street - Phoenix, Arizona 85004-3903
Phone (602) 417-2470**

1997

NOTICE OF INTENTION TO DRILL, DEEPEN, REPLACE OR MODIFY A WELL

PLEASE READ SPECIFIC INSTRUCTIONS, LIMITATIONS AND CONDITIONS ON REVERSE SIDE OF THIS FORM BEFORE COMPLETING

PLEASE COMPLETE ALL ITEMS IN THE BOX BELOW DOWN TO COUNTY OR LOCAL AUTHORITY ENDORSEMENT. IF ANY WATER FROM THE PROPOSED WELL (LISTED BELOW) WILL BE USED FOR DOMESTIC PURPOSES ON A PARCEL OF LAND 20 OR FEWER ACRES, THE APPLICABLE COUNTY OR LOCAL HEALTH AUTHORITY MUST ENDORSE ALL ITEMS IN THE BOX BEFORE SUBMITTING TO THE DEPARTMENT OF WATER RESOURCES.

Land Owner's Name: James A Simpson and Ruth K Simpson Revocable Trust Current Mailing Address: Box 4419 Kingman AZ City: Kingman State: AZ Zip: 86402

Telephone No.: 520-753-1159 COUNTY ASSESSOR'S PARCEL ID INFORMATION:

Well Located In: Mohave County BOOK: 208 MAP: 30 PARCEL: 013 # of Acres: 116.04

Well/Land Location (must be completed as requested):
NE 1/4 SF 1/4 NE 1/4 of Section 3 Township 18 N Range 18 EW

10AC 40AC 160AC COUNTY OR LOCAL AUTHORITY ENDORSEMENT

Check one:
 Recommend Approval ; Insufficient Information to Make Determination ; Variance Required (Explanation attached)

DATE _____ AUTHORIZED SIGNATURE _____ TITLE _____

OFFICIAL SEAL OR STAMP

GENERAL INSTRUCTIONS FOR FILING NOTICE WITH ADWR

- Section 445-596(D) provides that the Director shall determine that all information required on this form has been submitted. If not, the person filing will be notified, and the drilling, deepening or modification of the well may not proceed.
- Section 445-596(d) provides that the Department has 15 days after the receipt of a complete and correct notice of intention to record the notice and mail duplicate to owner. Drill card will be mailed directly to drilling firm as stated in Item #14.
- Please mail two original notices with original signatures, a site plan in DUPLICATE, and a check or money order (no cash) in the amount of \$10.00 to P.O. Box 458, Phoenix, Arizona 85001-0458 or hand deliver to 500 North Third Street, Phoenix, Arizona 85004-3903. USE BLACK OR BLUE INK.
- If the well is a replacement, deepening or modification of an existing well, provide the registration number of the existing well in Item 2.
- Construction standards for wells, including abandonment, shall be in accordance with Department Rules.

- Owner of well:
James A & Ruth K Simpson
 Name
Box 4419
 Current Mailing Address
KINGMAN AZ 86402
 City State Zip
 Telephone No. 520 753 1159
- Action requested: Drill New Well ; Deepen Modify Replace .
 For a replacement well provide:
 Maximum capacity of the original well _____ gallons per minute; distance from the original well _____ feet.
 Well Registration No. 55- _____
- Construction will start about:
 Month AUG Year 1997
- Description of proposed well:
 Diameter 6 inches
 Depth 580 feet
 Type of Casing STEEL
- Design pump capacity:
100 gallons per minute

- Lessee of land of well(s):
 Name N/A
 Current Mailing Address _____
 City State Zip
 Telephone No. _____
- Principal Use of Water; (be specific):
IRRIGATION OF CROPS
- Other uses of Water; (be specific):
IRRIGATION WIND BREAK TREES
- If use includes irrigation, state to nearest tenth, the number of acres to be irrigated; 150.0

- Place of Use (Legal Description of Land):
1/2 NE 1/4 Part Lot 1, Sec 3 NE 1/4 Sec 3
NE 1/4 SE 1/4 Sec 3
 10 AC 40AC 160AC
 Township 18 N Range 18 EW
- Type of Well (Check One):
 Exempt Non-Exempt
- Check One:
 Residential Commercial
- Is the proposed wellsite within 100 feet of a septic tank system, sewage disposal area, landfill, hazardous materials or petroleum storage areas and tanks? Yes No
- Drilling Firm:
CAMPBELLS DRILLING, INC.
 Name
P.O. BOX 3019
 Mailing Address
WICKENBURG, AZ. 85358
 City State Zip
520-684-7546
 Telephone No. 35
 DWR License Number A-04 / C-53
 ROC License Category

FOR DEPARTMENT USE ONLY

File No. B(18-18)3ADA
 Filed 7-11-97 By OC
 Input _____ By _____
 DUPLICATE MAILED
 Date 7-28-97
 Registration 55- 5103937
 AMA/INA _____
 W/S 02/SB

ENTERED AUG . 4 1997

I State that this Notice is filed in compliance with A.R.S. 445-595 and 45-596 and is complete and correct to the best of my knowledge and belief and that I understand the limitations and conditions set forth on the reverse side of this form.

JAMES A. SIMPSON James A Simpson 10 July, 1997
 Typed or Printed Name and Title Signature [] Land Owner [] Lessee of Wellsite, Title Date

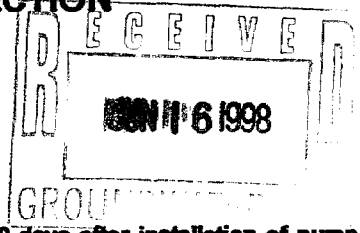
SPECIFIC INSTRUCTIONS, LIMITATIONS AND CONDITIONS

1. Pursuant to Section §45-596, Arizona Revised Statutes, provides: a person may not drill, deepen, or modify any well, without first filing a Notice of Intention to Drill with the Department.
2. If any water from a proposed well on a parcel of land of twenty or fewer acres will be used for domestic purposes, as defined in §45-45, the applicant shall submit a site plan to scale of the property with the county assessor's parcel identification number. The site plan:
 - a. Will be on a 8½"x11" piece of plain paper with representation of the locations of all structures, septic tank or sewer systems and proximity of adjacent lot lines to scale.
 - b. Must show the proposed well location and the location of any septic or sewer system that is either located on the property or within one hundred feet of the proposed well site.
 - c. Shall demonstrate to the Director's satisfaction that the well will not be drilled within one hundred feet of any septic or sewer system.
 - d. Must be approved by the county health authority, or by a local health authority in areas where the county health authority has delegated authority to approve septic or sewer systems. Before approval, the health authority shall review the plan and determine whether the proposed well location complies with applicable state and local laws regarding the placement of wells. If so, the health authority shall endorse the site plan and the proposed well placement.
3. Endorsement by the county/local authority is based on the best available judgement that this well, as shown on the site plan submitted, is 100 feet or more from all known and visually identifiable sewage treatment systems. It is not a representation that a well placed at this site will be guaranteed as to quantity or quality. Information brought to light at a future date may render this determination invalid.
4. If a well which was originally drilled as an exploration well, a monitor well, a piezometer well or for any use other than domestic use and is later proposed to be converted to use for domestic purposes, as defined in section §45-454, the well owner shall file a notice of intention to drill and comply with the requirements prescribed pursuant to this section before the well is converted and any water from that well used for domestic purposes.
5. Only a well driller licensed in the State of Arizona is authorized to drill, deepen or modify a well. A well driller 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.
6. An exempt well means a well having a pump with a maximum capacity of not more than thirty-five (35) gallons per minute and may include the application of water to less than two (2) acres of land in an Irrigation Non-Expansion Area or Active Management Area to produce plants or parts of plants for sale, human consumption or for use as feed for livestock, range livestock or poultry.
7. The drilling, deepening, or modification of this well shall be completed within one (1) year of the date of the notice (§45-596.E.).
8. Within thirty (30) days after the installation of pumping equipment on this well, the registered well owner shall file the prescribed Completion Report. A form for this purpose will be furnished to the registered owner with the return of an annotated copy of this notice.
9. The person to whom a well is registered shall notify the Department of a change in ownership or a change in data relating to this well. The prescribed form for these purposes will be furnished to the registered owner with the return of an annotated copy of this Notice.
10. If an individual other than the land owner or lessee signs this Notice, an original letter of authorization from the land owner/lessee, stating that the individual has permission to sign this specific Notice on their behalf, shall accompany the Notice.

B(18-18)3 ADA

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

500 North Third Street, Phoenix, Arizona 85004-3903
Phone (602) 417-2470



COMPLETION REPORT
(Pump Installation Report)

1. Per A.R.S. § 45-600, the Completion Report is to be filed with the Department within 30 days after installation of pump equipment by the registered well owner.
2. Drawdown of the water level for a non-flowing well should be measured in feet after not less than 4 hours of continuous operation. 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.
3. The static groundwater level should be measured in feet from the land surface immediately prior to the well capacity test.
4. 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.

REGISTRATION NO: 55- 56 3937 FILE NO: B(18-18)3 ADA

LOCATION OF THE WELL:

18 N/S Township 18 E/W Range 3 Section 1/4 NE 10-acre 1/4 SE 40-acre 1/4 NE 160-acre

EQUIPMENT INSTALLED:

Kind of pump Submersible Kind of power Diesel / Electric generator
Turbine, submersible, centrifugal, etc. (Electric, natural gas, gasoline, etc.)
H.P. Rating of Motor 10 Pumping Capacity 45
Date Pump Installed
pump set NOV 15, 1997
Piping & Elec. completed JAN 9, 1998

WELL TEST:

Test pumping capacity 49 Gallons per minute Date Well Tested: 11 June, 1998

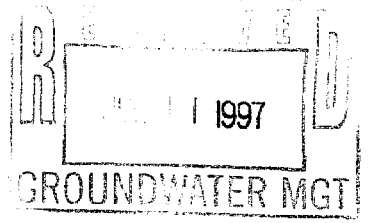
Method of Discharge Measurement Time to fill measured volume in reservoir Weir, orifice, current meter, etc.

Static Groundwater Level 427 ft. Drawdown 21 ft.

Total Pumping Lift 459 ft. Drawdown N/A lbs. (Flowing Well)

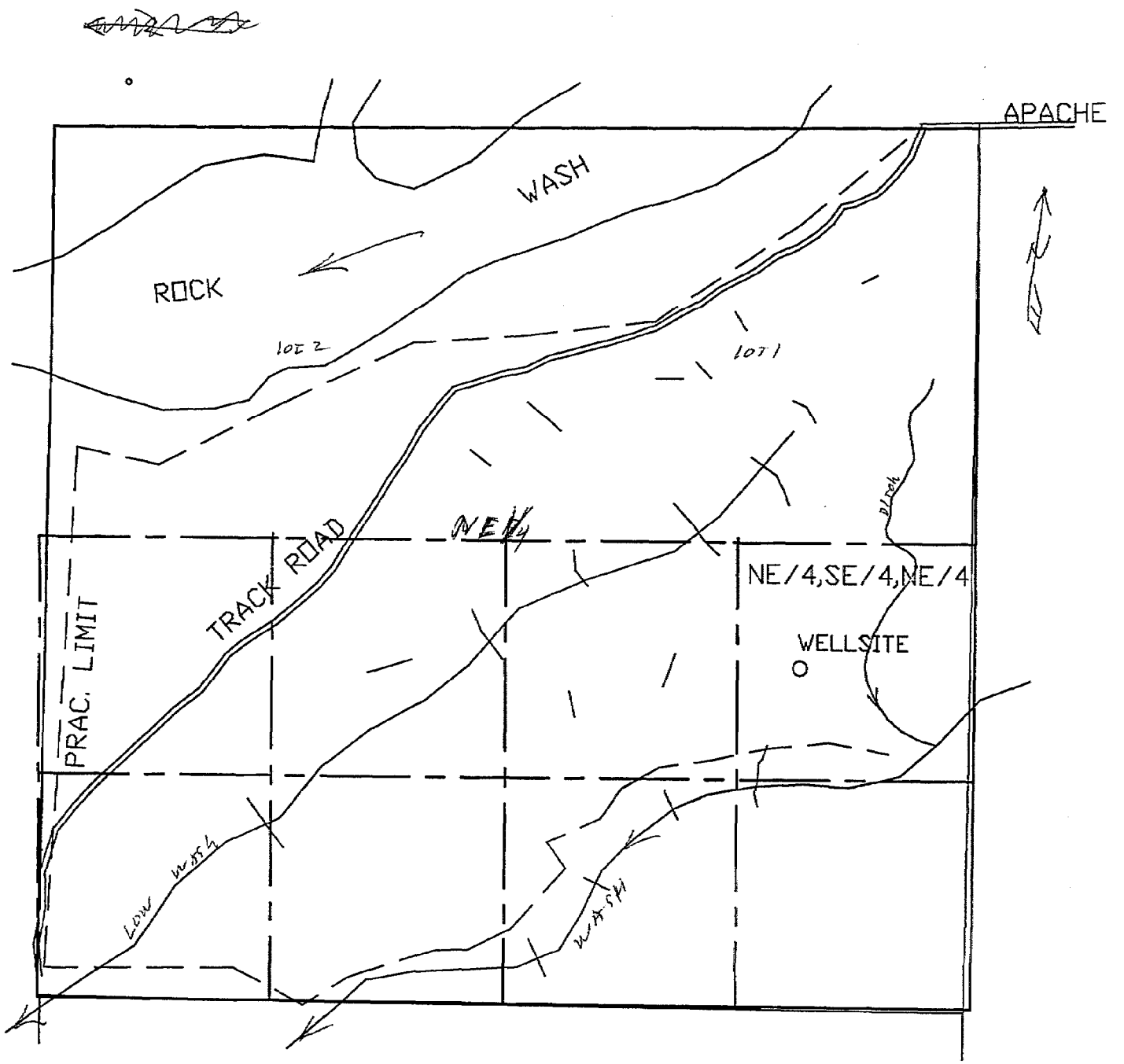
I HEREBY CERTIFY that the above statements are true to the best of my knowledge and belief.

James A. Simpson Box 4419 Wingman AZ 86402
Print Well Owner's Name Address City State Zip
Signature of Well Owner 520-753-1159 June 13, 1998
Phone Number Date



SITE PLAN FOR WELL IN SEC 3 T18N R18W

LEGAL ACCESS IS BY APACHE ROAD FROM
ACCESS ROAD ALONG I40.



ARIZONA DEPARTMENT OF WATER RESOURCES

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



FIFE SYMINGTON
Governor

RITA P. PEARSON
Director

July 29, 1997

JAMES A & RUTH K SIMPSON
BOX 4419
KINGMAN AZ 86402

Registration No. 55-563937
File No. B(18-18)3 ADA

Dear Well Owner:

Enclosed is a copy of the Notice of Intention (NOI) to drill/deepen/modify/replace a well. This NOI, which was recently filed with this Department, is being returned to you as evidence of your compliance with ARS §45-596. The enclosed Completion Report is to be submitted when pump equipment is installed. The Drilling Card and Well Drilling Report form have been sent to your driller. He may not begin drilling until he has received the Drilling Card and it must be displayed on the rig during drilling. If you change drillers, you must supply this Department with the new driller's identity. Please ensure that the driller you select is licensed to drill the type of well you require. All well drillers must pass an examination proving they understand the drilling methods for that particular license, and are familiar with the laws and regulations which govern well construction in Arizona.

If it is necessary to change the location of the proposed well, immediately contact the Department of Water Resources to obtain written permission before proceeding with the drilling. A properly signed, amended Drilling Card must be in the possession of the driller before drilling commences at a different location than originally authorized.

ARS §45-600 requires the registered well owner to submit a completion report within thirty (30) days after the installation of pumping equipment. It also requires the driller to furnish this Department a complete and accurate log of the well within thirty (30) days after completion of drilling. You should insist, and ensure, that both of these are done.

If in the course of drilling a new well, it is determined that the new well cannot be successfully completed as initially intended (dry hole, cave in, lost tools, etc.), the new well must be properly abandoned and a Well Abandonment Completion Report submitted per R12-15-816.F.

Per ARS §45-593 (C), the person to whom a well is registered shall notify this 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. We have enclosed a Change of Well Information Form should it be needed in the future.

Sincerely,

A handwritten signature in cursive script, appearing to read "S. Valdez".

Sylvia Valdez
Water Resource Technician
Groundwater Management Support Section

**ARIZONA DEPARTMENT OF WATER RESOURCES
GROUNDWATER MANAGEMENT SUPPORT SECTION
500 North Third Street
Phoenix, Arizona 85004-3903**

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

WELL REGISTRATION NO: 55-563937

AUTHORIZED DRILLER: CAMPBELLS DRILLING, INC. LICENSE NO: 35

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

WELL OWNER: JAMES A & RUTH K SIMPSON BOX 4419 KINGMAN AZ 86402

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

NE 1/4 of the SE 1/4 of the NE 1/4 Section 3 Township 18 NORTH Range 18 WEST

No. of wells in this project: 1

THIS AUTHORIZATION EXPIRES AT MIDNIGHT ON THE 10TH DAY OF JULY, 1998.



CHIEF, GROUNDWATER MANAGEMENT SUPPORT

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

