

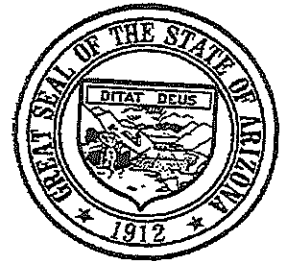
ARIZONA DEPARTMENT OF WATER RESOURCES

500 North 3rd Street, Phoenix, Arizona 85004

Telephone (602) 417-2470

Fax (602) 417-2422

March 17, 2003



Janet Napolitano
Governor

Herb Guenther
Director

BECKSTRAND, MICHELE & TUCK, KEVIN
5522 PIONEER FORK RD
SALT LAKE CITY, UT 84108

Registration No. 55-597646

File No. D(15-16) 13 BAC

Dear Well Owner:

Enclosed is a copy of the Notice of Intention (NOI) to Drill 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 Pump Installation 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 Pump Installation 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 Well Drillers Report and Well Log 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,

Shannon Reif
Hydrology Division

Enclosures



Arizona Department of Water Resources
Groundwater Management Support Section
P.O. Box 458 • Phoenix, Arizona 85001-0458
(602) 417-2476 • (800) 352-8488
www.water.az.gov

\$10 FEE

Notice of Intent to Drill, Deepen, Replace or Modify a Well
(except a Non-Exempt Well in an Active Management Area)

- Review instructions prior to completing form
- You must include with your Notice:
 - \$10 check or money order for the processing fee
 - Authority for fee: A.R.S. § 45-113(B), A.A.C. R12-15-151(B)(4)(a)

AMA / INA TUC	B 16	SB
RECEIVED 3-10-03	DATE	WS 09
ISSUED	DATE	WQARF CERCLA

FILE NUMBER DC15-1613 B AC
WELL REGISTRATION NUMBER 55-597646

**** PLEASE PRINT CLEARLY ****

SECTION 1. COUNTY OR LOCAL HEALTH AUTHORITY ENDORSEMENT (if applicable)
If water from the proposed well will be used for domestic purposes on a parcel of land of 20 or fewer acres, the applicable county or local health authority must endorse all items in Section 1 before submission to the Department of Water Resources. You must also attach a site plan (see instructions).

CHECK ONE

County or Local Health Authority Recommends Approval (pursuant to A.R.S. § 45-596 (G) and (F))

Field Inspection Performed

Site Plan Review Only

Insufficient Information to Make a Determination

COUNTY OR LOCAL AUTHORITY NAME AND TITLE

TELEPHONE NUMBER

DATE

COUNTY OR LOCAL AUTHORITY SIGNATURE

n/a

SECTION 2. REGISTRY INFORMATION

Well Type CHECK ONE <input checked="" type="checkbox"/> 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.) <input type="checkbox"/> Non-Exempt (Pump has a maximum capacity of more than 35 gpm or water is used for irrigation purposes inside an AMA.) (See instructions.)	Proposed Action CHECK ONE <input checked="" type="checkbox"/> Drill New Well <input type="checkbox"/> Deepen <input type="checkbox"/> Replace <input type="checkbox"/> 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) <i>W1/2, NE1/4, NW1/4 AND SW1/4, NE1/4, NW1/4, 13-15-16</i> TOWNSHIP (NS) RANGE (EW) SECTION 160 ACRE 40 ACRE 10 ACRE 15S 16E 13 NW1/4 NE1/4 SW1/4 COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL # # OF ACRES 205 69 0330 & 0370 30 PLACE OF WATER USE (ONLY IF DIFFERENT FROM LOCATION OF WELL) TOWNSHIP (NS) RANGE (EW) SECTION 160 ACRE 40 ACRE 10 ACRE 1/4 1/4 1/4 1/4 1/4 COUNTY WHERE WELL IS LOCATED Pima
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SECTION 3. OWNER INFORMATION

Well Owner FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL <i>Kevin Turk & Michele Beckstrand</i> MAILING ADDRESS <i>5522 Pioneer Fork Rd.</i> CITY / STATE / ZIP CODE <i>Salt Lake City, UT 84108</i> CONTACT PERSON NAME AND TITLE <i>Lynn Hansen, ALS, broker (Agent for Well Owner)</i> TELEPHONE NUMBER <i>520 742-1410</i> FAX <i>520 575-6534</i>	Landowner (if different from Well Owner) FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL <i>Jonnie Banks</i> MAILING ADDRESS <i>4932 Calle de Tierra NE</i> CITY / STATE / ZIP CODE <i>Albuquerque NM 87111</i> CONTACT PERSON NAME AND TITLE <i>Rebecca Patsch, CRS, GRI</i> TELEPHONE NUMBER <i>520 918-1417</i> FAX <i>520 790-7574</i>
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SECTION 4. Questions

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?		<input checked="" type="checkbox"/>	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?		<input checked="" type="checkbox"/>	PLEASE STATE
3. Is the proposed well the second exempt well on this parcel for the same use?		<input checked="" type="checkbox"/>	If the proposed well is in an Active Management Area, you must also file a supplemental form 55-40A.

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

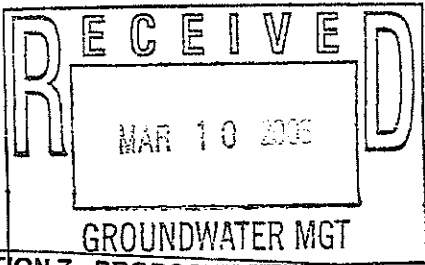
WELL REGISTRATION NUMBER
55-599646

SECTION 5. DRILLING AUTHORIZATION SECTION 6. WATER / SITE INFORMATION

Drilling Firm
 NAME: HIGH DESERT WATER DRILLING
 DWR LICENSE NUMBER: 236
 TELEPHONE NUMBER: 520 896-2750
 ROC LICENSE CATEGORY: A-4 & C-53
 FAX: 520 819-2306

Principal Use of Water
 CHECK ONE
 Irrigation
 Utility
 Commercial
 Domestic
 Municipal
 Industrial
 Mining
 Stock
 Recharge
 Dewatering
 Other (please specify):

Other Uses of Water
 CHECK ALL THAT APPLY
 Irrigation
 Utility
 Commercial
 Domestic
 Municipal
 Industrial
 Mining
 Stock
 Recharge
 Dewatering
 Other (please specify):



SECTION 7. PROPOSED WELL CONSTRUCTION DESIGN (attach separate sheet if needed) DATE CONSTRUCTION IS TO BEGIN 3/14/03 or as soon as permit comes back

Borehole			Casing														
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE (X)				PERFORATION TYPE (X)					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 5/8"	0	20'	8 5/8"	X*											
20'	1000'	6 3/4"	20'	1000'	5 1/4"	X											Cement

* 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.

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: Lynn Hansen, RLS, broker, agent of Well Owner

SIGNATURE OF WELL OWNER OR LANDOWNER: *Lynn Hansen*

DATE: 03/05/03

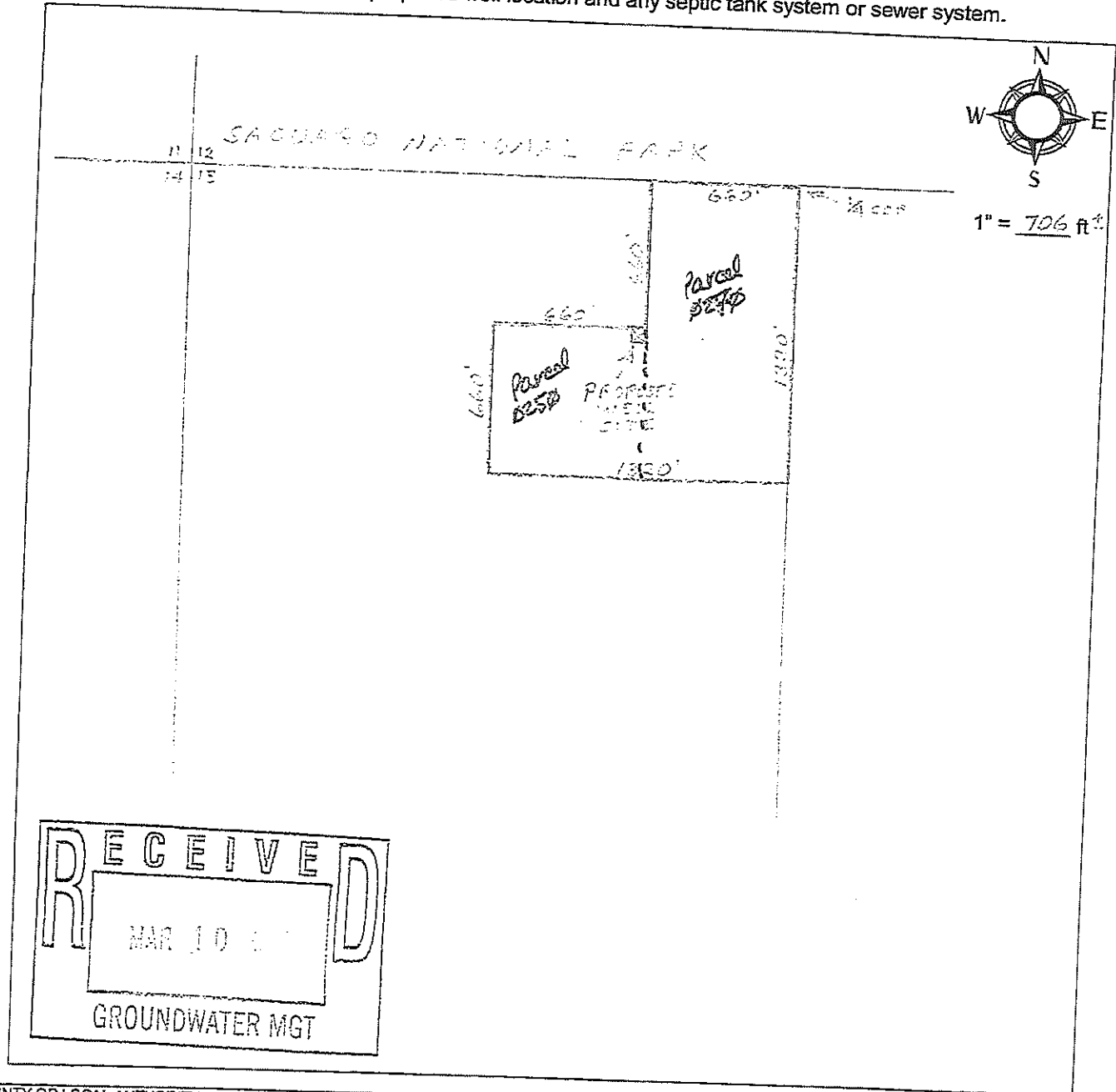
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WELL SITE PLAN
NAME OF WELL OWNER
Kevin Tack & Michele Beckstrand

COUNTY ASSESSOR'S PARCEL ID NUMBER
BOOK 205 MAP 69 PARCEL 0250 & 0270

- ❖ If this well will be a domestic well on 20 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.



RECEIVED
MAR 10 2007
GROUNDWATER MGT

COUNTY OR LOCAL AUTHORITY NAME AND TITLE		Official County or Local Seal or Stamp
COUNTY OR LOCAL AUTHORITY SIGNATURE		
TELEPHONE NUMBER	DATE	