

Run Date: 02/28/2013

# AZ DEPARTMENT OF WATER RESOURCES

## WELL REGISTRY REPORT - WELLS55

Location D 7.0 20.0 21 B D A Well Reg.No 55 - 613296 AMA NOT WITHIN ANY AMA OR INA

**Registered Name** MICHAEL & SUSAN CAVENDER  
1921 WEST DE HAVILAND WAY  
TUCSON AZ 85737

**File Type** REGISTERED WELL  
**Application/Issue Date** 06/10/1982

**Owner** OWNER  
**Driller No.** 0  
**Driller Name**  
**Driller Phone**  
**County** GRAHAM

**Well Type** NON-EXEMPT  
**SubBasin** ARAVAIPA CANYON  
**Watershed** SAN PEDRO RIVER  
**Registered Water Uses** IRRIGATION  
**Registered Well Uses** WATER PRODUCTION  
**Discharge Method** NONE  
**Power** NO POWER CODE LISTED

**Intended Capacity GPM** 0.00

**Well Depth** 152.00  
**Pump Cap.** 1,225.00  
**Draw Down** 0.00

**Case Diam** 16.00  
**Case Depth** 132.00  
**Water Level** 51.00  
**Acres Irrig** 90.00

**Tested Cap** 0.00  
**CRT**  
**Log**  
**Finish** STEEL - PERFORATED OR SLOTTED CASING

**Contamination Site:** NO - NOT IN ANY WQARF SITE

**Tribe:** GRIC Impact zone or buffer

**Comments**

**Places Of Use**

D 7 0 20 0 21 B  
D 99 0 99 0 99 B

**Current Action**

2/28/2013 858 CHANGE OF OWNER INFORMATION (ADDRESS, NAME, ETC)  
Action Comment: cp

**Action History**

7/29/2011 882 GRIC CADASTRAL BOUNDARY CHANGE  
Action Comment: Old GRIC Code = NULL  
3/1/1960 755 WELL CONSTRUCTION COMPLETED  
Action Comment:



**Arizona Department of Water Resources**  
 Water Management Division  
 P.O. Box 36020 Phoenix, Arizona 85067-6020  
 (602) 771-8527 • www.azwater.gov

**Request to Change Well Information**

RECEIVED  
 FEB 21 2013

FILE NUMBER  
 D(7-20) 21 bda  
 WELL REGISTRATION NUMBER  
 55 - 613296

- ❖ Review instructions prior to completing form in black or blue ink.
  - ❖ You must include with your Notice:
    - check or money order for any required fee(s)
  - ❖ Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104
- \*\* PLEASE PRINT CLEARLY \*\***

<b>SECTION 1. REGISTRY INFORMATION</b>						
<b>Well Owner</b>			<b>Location of Well</b>			
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Michael J. Cavender and Susan S. Cavender			WELL LOCATION ADDRESS (IF ANY) ---			
MAILING ADDRESS 1921 West De Haviland Way			TOWNSHIP (N/S) 7S	RANGE (E/W) 20E	SECTION 21	160 ACRE NW ¼
CITY / STATE / ZIP CODE Tucson, Arizona 85737			LATITUDE		LONGITUDE	
			Degrees	Minutes	Seconds	"N
			Degrees	Minutes	Seconds	"W
CONTACT PERSON NAME AND TITLE Michael J. Cavender			METHOD OF LATITUDE/LONGITUDE (CHECK ONE) <input 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 type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):			
TELEPHONE NUMBER 520-742-1448		FAX ---	COUNTY ASSESSOR'S PARCEL ID NUMBER		COUNTY WHERE WELL IS LOCATED	
			BOOK 101	MAP 45	PARCEL 025E	Graham

**Type of Request (CHECK ONE)**

Change of Well Drilling Contractor (Fill out Section 2)     Change of Well Ownership (Fill out Section 3)     Change of Well Information (location, use, etc.) (Fill out Section 4)

<b>SECTION 2. REQUEST TO CHANGE WELL DRILLING CONTRACTOR</b>			<b>FEE \$120 per Well</b>	
♦ If drilling or abandoning a well, the Department must receive this request and issue authorization to the new drilling firm prior to the commencement of well drilling or abandonment.				
<b>Current Well Drilling Contractor</b>			<b>New Well Drilling Contractor</b>	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL			FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL	
DWR LICENSE NUMBER			DWR LICENSE NUMBER	ROC LICENSE CATEGORY
TELEPHONE NUMBER		FAX	TELEPHONE NUMBER	FAX

<b>SECTION 3. STATEMENT OF CHANGE OF WELL OWNERSHIP</b>				<b>FEE \$30 per Well</b>	
♦					
<b>Previous Well Owner</b>			<b>New Well Owner</b>		
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL			FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL		
MAILING ADDRESS			MAILING ADDRESS		
CITY / STATE / ZIP CODE			CITY / STATE / ZIP CODE		
CONTACT PERSON NAME AND TITLE			CONTACT PERSON NAME AND TITLE		
TELEPHONE NUMBER		FAX	TELEPHONE NUMBER		FAX

**SECTION 4. CHANGE OF WELL INFORMATION (No Fee Required)**

**NOTE:** Applies only to wells that have already been drilled. For proposed wells, an amended Notice of Intent to Drill a Well must be filed.

EXPLAIN See Schedule A attached hereto and made a part hereof.

**SECTION 5. 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 6. WELL OWNER SIGNATURE**

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

TYPE OR PRINT NAME AND TITLE Michael J. Cavender	SIGNATURE OF WELL OWNER <i>Michael J. Cavender</i>	DATE 12-11/2012
---	---	--------------------

## SCHEDULE A

Request to Change Well Information – Registered Well No. 55-613296  
Michael J. Cavender and Susan S. Cavender  
Graham County, Arizona

This well is part of the irrigation system on the Cavenders' property and can be used to irrigate up to 168.44 acres of land, as shown on the attached map of irrigation fields.

The current irrigated fields include:

Field A	42.73 acres	SE NW, SW NW, NE SW and NW SE Section 17 T7S R20E
Fields B and C	44.46 acres	NW SE, NE SE, SW SE and SE SE Section 17 T7S R20E SW SE, SE SE Section 17, NW NW Section 21, and portion of NE NE Section 20, T7S R20E
Field D	<u>62.36 acres</u>	SE SE Section 17 and NW NW Section 21, T7S R20E

149.55 acres

The 18.89 acres shown on the attached map were historically irrigated; however, they have not been irrigated for a number of years.

Unnamed	18.89 acres	NW NW Section 21 T7S R20E
---------	-------------	---------------------------

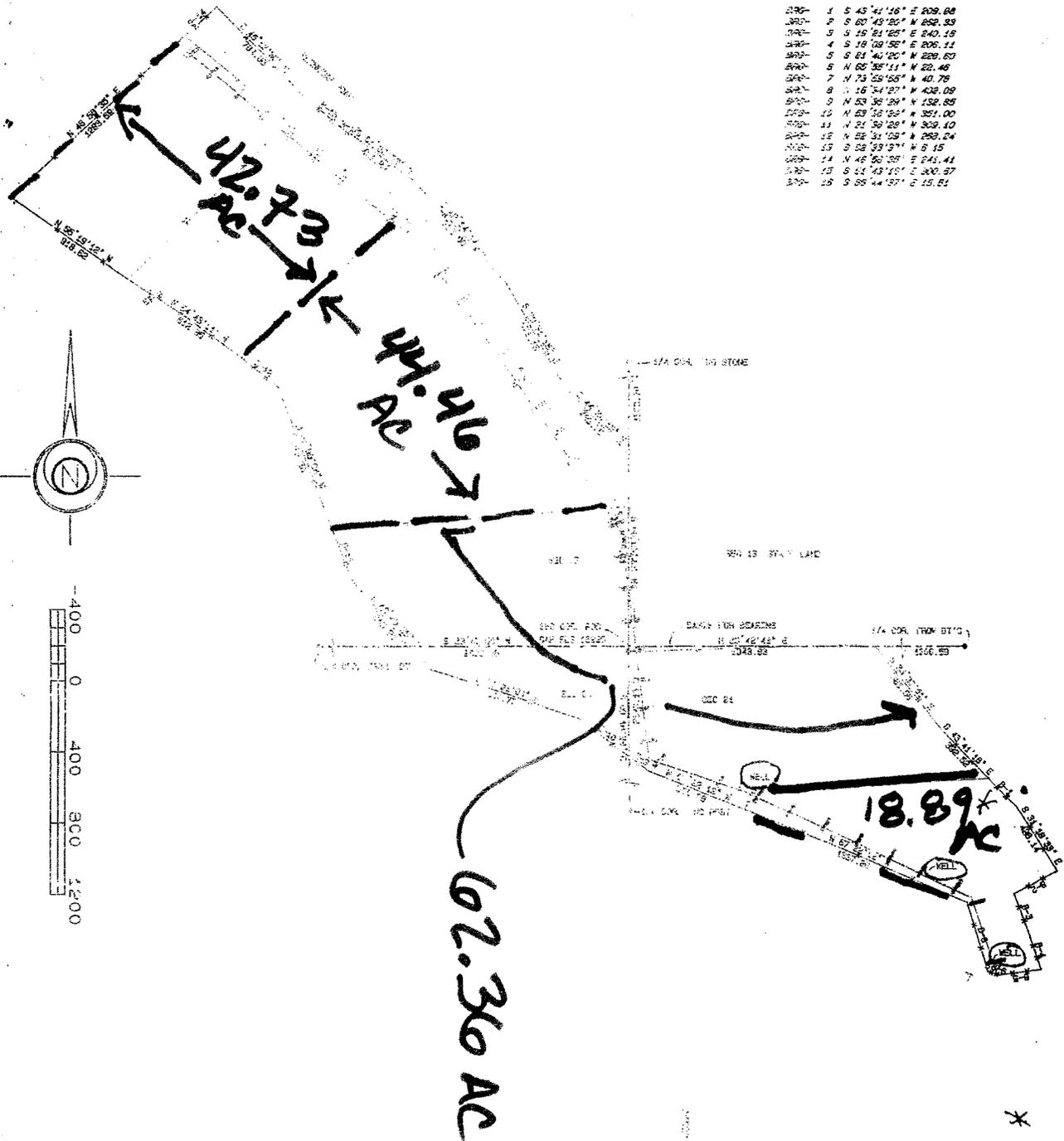
The wells that are part of the irrigation system on the Registrants' property are also used for stockwatering purposes. Drinkers located throughout the property are filled with water supplied by these wells.

This well does not provide water to the following stockponds:

- "Horse Pasture Tank" described in Stockpond Registration No. 38-72589 and Statement of Claimant No. 39-2148.
- "Tailwater Tank" described in Stockpond Registration No. 38-72582 and Statement of Claimant No. 39-2149.

~~~~~  
Attachment: Map showing the location of irrigated fields.

|    |   |    |    |    |   |        |
|----|---|----|----|----|---|--------|
| 1  | 5 | 45 | 41 | 16 | E | 809.88 |
| 2  | 5 | 60 | 43 | 20 | N | 852.33 |
| 3  | 5 | 15 | 21 | 25 | E | 240.15 |
| 4  | 5 | 15 | 20 | 52 | E | 800.11 |
| 5  | 5 | 21 | 41 | 20 | N | 229.80 |
| 6  | 5 | 25 | 35 | 11 | N | 22.46  |
| 7  | 5 | 25 | 55 | 55 | N | 40.76  |
| 8  | 5 | 16 | 54 | 27 | N | 402.09 |
| 9  | 5 | 53 | 36 | 24 | N | 132.85 |
| 10 | 5 | 23 | 16 | 25 | N | 351.00 |
| 11 | 5 | 21 | 30 | 25 | N | 300.10 |
| 12 | 5 | 25 | 31 | 53 | N | 293.24 |
| 13 | 5 | 25 | 33 | 3  | N | 8.15   |
| 14 | 5 | 45 | 50 | 25 | E | 241.41 |
| 15 | 5 | 24 | 43 | 10 | E | 300.57 |
| 16 | 5 | 25 | 44 | 57 | E | 15.81  |



\* The 18.89 acres were historically irrigated but are not currently irrigated.



Surveyed by [Name] on [Date] for [Client Name].  
 This map is for the use of [Client Name] only.  
 It is not to be used for any other purpose without the written consent of [Surveyor Name].

|                                         |                |
|-----------------------------------------|----------------|
| RESULTS OF SURVEY FOR KARBAD            |                |
| THELSEN SURVEYING SERVICES              |                |
| 3781 N. SOLF COURSE ROAD                |                |
| THATCHER, AZ 85582 602-428-0831         |                |
| PART OF SEC'S 17-20 & 21-T1S-R20E-66SPM |                |
| GRAHAM COUNTY - ARIZONA                 |                |
| SCALE 1"=400 Feet                       | JAN 30, 1987   |
| DATE P-24-1985                          | SHEET 11 OF 11 |

THE LAW OFFICE OF

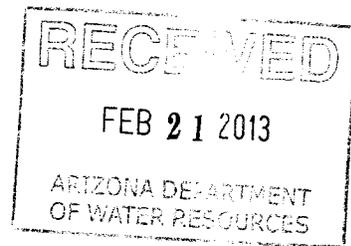
L. ANTHONY FINES  
lafines@lafinespc.com

**L. ANTHONY FINES, P.C.**  
145 S. Sixth Avenue  
Tucson, Arizona 85701

TELEPHONE  
(520) 547-2890  
TELEFAX  
(520) 882-0617

February 20, 2013

Arizona Department of Water Resources  
Water Management Division  
P.O. Box 36020  
Phoenix, AZ 85067-6020



Re: Michael J. Cavender and Susan S. Cavender

Dear Sir or Madam:

Enclosed are originals and one copy of the following documents with the appropriate filing fee:

1. Request to Change Well Information re 55-613295 with a filing fee of \$30.00.
2. Request to Change Well Information re 55-613296 (no filing fee required).
3. Request to Change Well Information re 55-613297 (no filing fee required).
4. Statement of Claimant Form for Domestic Use re 55-645605 with a filing fee of \$20.00.
5. Statement of Claimant Form for Domestic Use re 55-553455 with a filing fee of \$20.00.
6. Statement of Claimant Form for Domestic Use re 55-578417 with a filing fee of \$20.00.
7. Request to Change Well Information re 55-645605 with a filing fee of \$30.00.
8. Request to Change Well Information re 55-219964 (no filing fee required).
9. Statement of Claimant Form for Domestic Use re 55-219964 with a filing fee of \$20.00.
10. Request to Change Well Information re 55-219965 (no filing fee required).
11. Statement of Claimant Form for Domestic Use re 55-219965 with a filing fee of \$20.00.

ADWR  
Re: Michael/Susan Cavender  
February 20, 2013  
Page 2 of 2

12. Request to Change Well Information re 55-219966 (no filing fee required).
13. Statement of Claimant Form for Domestic Use re 55-219966 with a filing fee of \$20.00.

We have also enclosed a self-addressed, stamped envelope for the return of the filed-stamped copies of the above documents. If you have any questions, please call our office.

Sincerely,



L. Anthony Fines

LAF:lv  
Enclosures

DEPARTMENT OF WATER RESOURCES  
 99 EAST VIRGINIA AVENUE  
 PHOENIX, ARIZONA 85004

**REGISTRATION OF EXISTING WELLS**

READ INSTRUCTIONS ON BACK OF THIS FORM BEFORE COMPLETING  
 PRINT OR TYPE - FILE IN DUPLICATE

**REGISTRATION FEE (CHECK ONE)**

EXEMPT WELL (NO CHARGE)

NON-EXEMPT WELL - \$10.00

48

ARIZONA DEPT OF WATER RESOURCES  
 FOR OFFICE USE ONLY

REGISTRATION NO. 613296

FILE NO. D(7-20)21 bda

FILED 6-10-82 AT 3:50 pm  
 (DATE) (TIME)

WA INA -  
 RESOURCAMA -

1. Name of Registrant: Whiting Ranches  
Klondyke Rural st. Willcox AZ 85643  
 (Address) (City) (State) (Zip)

2. File and/or Control Number under previous groundwater law:  
D07020021 BDAGS1 35- none  
 (File Number) (Control Number)

3. a. The well is located within the NE  $\frac{1}{4}$  SE  $\frac{1}{4}$  NW  $\frac{1}{4}$ , Section 21,  
 of Township 7S N/S, Range 20E E/W, G & SRB & M, in the  
 County of Graham.

b. If in a subdivision: Name of subdivision \_\_\_\_\_  
 Lot No. \_\_\_\_\_, Address \_\_\_\_\_

4. The principal use(s) of water (Examples: irrigation - stockwater - domestic - municipal - industrial)  
irrigation

5. If for irrigation use, number of acres irrigated from well 90

6. Owner of land on which well is located. If same as Item 1, check this box   
 \_\_\_\_\_  
 (Address) (City) (State) (Zip)

7. Well data (If data not available, write N/A)

a. Depth of Well 152 feet

b. Diameter of casing 16 inches

c. Depth of casing 132 feet

d. Type of casing Perforated steel

e. Maximum pump capacity 1200 - 1225 gallons per minute.

f. Depth to water 51 feet below land surface.

g. Date well completed 3 (Month) 1 (Day) 60 (Year)

8. The place(s) of use of water. If same as Item 3, check this box .

21  $\frac{1}{4}$  NW  $\frac{1}{4}$ , Section 21 Township 7S Range 20E

17  $\frac{1}{4}$  NW  $\frac{1}{4}$ , Section 17 Township 7S Range 20E

SW  $\frac{1}{4}$ , Section 17 Township 7S Range 20E MICROFILMED

Attach additional sheet if necessary.

9. DATE 6-10-82 SIGNATURE OF REGISTRANT H.R. Whiting

## INSTRUCTIONS FOR COMPLETING REGISTRATION FORM

### General Instructions

1. A person who owns an "Existing Well" shall register the well, pursuant to A.R.S. 45-593, by filing this form in duplicate with the Department of Water Resources not later than midnight June 14, 1982. The form must be completed and signed. Failure to do so will constitute a violation of A.R.S. 45-593, and may subject the well owner to injunction and/or civil penalties, pursuant to A.R.S. Title 45, Article 12.
2. An "Existing Well" means, (1) a well which was drilled on or before June 12, 1980 and which is not abandoned or sealed, or (2) a well which was not completed on or before June 12, 1980, but for which a Notice of Intention to Drill was on file with the Arizona Water Commission on or before June 12, 1980.
3. No registration fee is required for Exempt Wells. A \$10.00 registration fee must accompany registration forms for all Non-Exempt Wells.
4. An "Exempt Well" means a well having a pump with a maximum capacity of not more than 35 gallons per minute which is used to withdraw groundwater. An Exempt Well may include the non-commercial irrigation of not more than 1 acre of land.
5. A "Non-Exempt Well" means a well that is not an "Exempt Well".

### INSTRUCTIONS FOR REGISTRATION QUESTIONS

1. The Registrant must be the owner of the well and may be an individual, public or private corporation, company, partnership, firm, association, society, estate, trust, any other private organization or enterprise, the United States, any state, territory or country or a governmental entity, political subdivision or municipal corporation organized under or subject to the constitution and laws of this State.
2. If you own an existing irrigation well drilled at any time, or any other type of well drilled on or after June 20, 1968, you should have an assigned control and/or file number. Write these numbers in item 2. If you do not know the number, please explain the reason on the form or on an attached sheet.
3.
  - a. Fill in the Section, Township and Range in all cases if it is available.
  - b. If the well is in a subdivision and you have this information, give the subdivision name, Lot Number, and Address.
4. Show all purposes for which the water is used.
5. If the well is used for irrigation, give the number of acres irrigated in 1980 from the well.
6. If the owner of the land is an individual, give the last name, first name, middle initial. If the owner of the land is a corporation, partnership, firm, etc., fill in the appropriate title.
7. Complete the section on Well Data with the most accurate information available to you. If the data is not available, write N/A in the blanks.
8. Give the legal description of the place of use of the water. If place of use is in a subdivision and legal description is not available, give the subdivision name, Lot Number and/or address on the blank line.
9. The person in whose name a well is registered shall notify the Department of any change in ownership and shall keep all information on the registration record current and accurate. A form entitled "Change of Well Information/Ownership" is available for this purpose. A blank form will be furnished with the returned duplicate copy of the registration form.

ARIZONA DEPARTMENT OF WATER RESOURCES  
Operations Division  
15 South 15th Avenue  
Phoenix, Arizona 85007

OK

CHANGE OF WELL INFORMATION

Well Reg. No. 613296

File (location) No. D(7-20) 21BDA

I/We request the following well information be changed:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_, 19\_\_\_\_

\_\_\_\_\_  
Signature of current Well Owner

(DO NOT CUT THIS FORM IN HALF)

STATEMENT OF CHANGE OF WELL OWNERSHIP

I, GORDON WHITING - PARTNER, WHITING RANCHES state that I am (no longer) the (new)  
(please print)  
owner of the well described below:

Township 15 Range 20E Section 21; NE 1/4 SE 1/4 NW 1/4

Well Registration No. \_\_\_\_\_ File (location) No. \_\_\_\_\_

WHITING RANCHES  
Previous Owner

WITHROW RANCH INCORPORATED  
PRINT New Owner's Name

KLONDYKE RURAL ST.  
Address

\_\_\_\_\_  
Signature of New Owner

WILLCOX, AZ 85643  
City State Zip

KLONDYKE RURAL ST.  
Address

DATED: \_\_\_\_\_

WILLCOX, AZ 85643  
City State Zip

**NOTE:** A.R.S. #45-593.C. requires that the Department be notified of change of well ownership and that the well owner is required to keep the Department's Well Registration records current and accurate. Well data and ownership changes must be submitted within thirty (30) 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, PRIOR TO DRILLING THE WELL, IN ADDITION TO AMENDING INFORMATION PREVIOUSLY FILED.

\*\*\*\*\*

ENTERED OCT 31 1989

ARIZONA DEPARTMENT OF WATER RESOURCES

OPERATIONS DIVISION

15 South 15th Avenue  
Phoenix, Arizona 85007

AUG 20 1993

**NOTE:** A.R.S. §45-593.C. requires that the Department be notified of change of well ownership and that the well owner is required to keep the Department's Well Registration records current and accurate. Well data and ownership changes must be submitted within thirty (30) days after changes take place. Therefore, this form may be completed in full by either the previous or new owner.

**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.**

**CHANGE OF WELL INFORMATION**

Well Registration No. 55- 613296 File No. D(7-20)21 BDA (If known)

I/We request the following well information be changed: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_ Signature of Current Well Owner \_\_\_\_\_

**STATEMENT OF CHANGE OF WELL OWNERSHIP**

I, James C Withrow, state that I am (~~no longer~~) the (new) owner of the well described below:

NE 1/4 SE 1/4 NW 1/4; Section 21 Township 7 S Range 20 E  
10 acre 40 acre 160 acre

Well Registration No. 55- 613296 File No. D(7-20)21 BDA (If known)

Withrow Ranch, Incorporated  
PRINT Previous Owner's Name

James C & Marie D Withrow  
PRINT New Owner's Name

Box 13 Klondyke Rural St  
Address  
Wilcox  
Klondyke AZ 85643  
City State Zip

Box 13  
Address  
Klondyke AZ 85643  
City State Zip

Dated 8-19-93 Signature ~~Previous~~/New Owner James Withrow

DWR-55-7-6/93(Rev)

ENTERED AUG 20 1993

**MICROFILMED**

ARIZONA DEPARTMENT OF WATER RESOURCES

OPERATIONS DIVISION

15 South 15th Avenue
Phoenix, Arizona 85007
(602)542-1581

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 (30) days after changes take place. Therefore, this form may be completed in full by either the previous or new owner.

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

THIS FORM MAY ALSO BE USED TO CHANGE OWNERSHIP OR REQUEST TO CHANGE THE WELL DRILLER. (SEE REVERSE SIDE)

1. CHANGE OF WELL INFORMATION

Well Registration No. 55- File No. (If known)

I/We request the following well information be changed:

Date: Signature of Current Well Owner

STATEMENT OF CHANGE OF WELL OWNERSHIP \$10.00 FEE REQUIRED

Kaibab Industries, Inc., an Arizona corporation, states that it is the (new) owner of the well described below:

NE 1/4 SE 1/4 NW 1/4 Section 21 Township 7S Range 20E
10 acre 40 acre 160 acre

Well Registration No. 55- 613296 File No. D (7-20) 21 BDA (If known)

James C. Withrow, in care of Marie D. Withrow Kaibab Industries, Inc.

PRINT Previous Owner's Name PRINT New Owner's Name

Box 13 4602 East Thomas Road

Mailing Address Mailing Address

Klondyke, Arizona 85643 Phoenix, Arizona 85018

City State Zip City State Zip

unknown (602) 840-5555

Telephone Telephone

Kaibab Industries, Inc.

DATED 11-3-94 SIGNATURE PREVIOUS/NEW OWNER By: H. R. Withrow

U.P.

3. REQUEST TO CHANGE WELL DRILLER

**\$10.00 FEE REQUIRED**

Well Registration No. 55-\_\_\_\_\_

File No. \_\_\_\_\_ (If known)

\_\_\_\_\_  
Original Well Driller

\_\_\_\_\_  
Requested New Well Driller

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
City                      State                      Zip

\_\_\_\_\_  
City                      State                      Zip

\_\_\_\_\_  
ADWR License No.

\_\_\_\_\_  
ADWR License No.

DATED \_\_\_\_\_ SIGNATURE OF WELL OWNER \_\_\_\_\_

The fee for change of well ownership or request of reissue of drill card (change of driller) is authorized by R12-15-151., effective June 30, 1994.

ARIZONA DEPARTMENT OF WATER RESOURCES  
GROUNDWATER MANAGEMENT SUPPORT SECTION

500 North Third Street, Phoenix, Arizona 85004-3903  
Phone (602) 417-2470 Fax (602) 417-2422

DEPARTMENT OF WATER RESOURCES

JAN 22 1996

OPERATIONS DIV.

REQUEST FORM TO CHANGE WELL INFORMATION  
OWNERSHIP \* DRILLER \* VARIANCE

Please complete the appropriate section of this request form and return 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- \_\_\_\_\_ FILE NO: \_\_\_\_\_

If known, I/We request the following well information be changed: \_\_\_\_\_

Date \_\_\_\_\_ Signature of Current Well Owner \_\_\_\_\_

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.

Kaibab Industries, Inc., an AZ corporation  
 states that it is \_\_\_\_\_, ~~state that it is~~ the Previous/~~NEW~~ Owner of the well described below:

NE ¼ SE ¼ NW ¼ of Section 21 Township 7 S Range 20 E  
10 Acre 40 Acre 160 Acre

Well Registration No. 55- 613296 File No. D (7-20) 21 BDA (if known)

Kaibab Industries, Inc.  
PRINT Previous Owner's Name

Michael J. and Susan S. Cavender  
PRINT New Owner's Name

4602 East Thomas Road  
Mailing Address

1921 Delaviland Way  
Mailing Address

Phoenix Arizona 85018  
City State Zip

Tucson Arizona 85737  
City State Zip

(602) 840-5555  
Telephone Number

(520) 742-1448  
Telephone Number

Signature of Previous/~~NEW~~ Well Owner [Signature] Date 1-18-96

ENTERED FEB - 5 1996

**ARIZONA DEPARTMENT OF WATER RESOURCES**  
**GROUNDWATER MANAGEMENT SUPPORT SECTION**  
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 drilling or 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      Date

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 or 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 \_\_\_\_\_

# RECEIPT

NE 25533

United Title Agency of AZ  
3030 North Central Avenue  
Phoenix, AZ 85012

STATE OF ARIZONA  
DEPARTMENT OF WATER RESOURCES  
500 NORTH THIRD STREET  
PHOENIX, ARIZONA 85004  
(602) 417-2405

Seller/Buyer: **D(7 Kaibab Ind/Cavender**

ENTRY CODE 55

FILE NO.

THRU

| ITEM DESCRIPTION                        | RATE | AMOUNT |
|-----------------------------------------|------|--------|
| Filing fee for Change of Well Ownership |      | 10.00  |
|                                         |      |        |
|                                         |      |        |
|                                         |      |        |
| Reg. No. 55-613297 D(7-20)21 BBC        |      |        |
| 55-553455 D(7-20)20 AAA                 |      |        |
| 55-613296 D(7-20)21 BDA                 |      |        |
| 55-613295 D(7-20)21 BDB                 |      |        |
|                                         |      |        |
|                                         |      |        |

CHECK NO. 17 3234

FEE ACCOUNT NO. \_\_\_\_\_

TOTAL \$ 10.00

CHIT NO. \_\_\_\_\_

RECEIVED BY Liz

DATE 1-31-96

WHITING RANCHES  
 KLONDYKE RURAL STATION  
 WILCOX AZ 85643  
 4602 E THOMAS RD  
 PHOENIX AZ 85018

STATE OF ARIZONA  
 DEPARTMENT OF WATER RESOURCES  
 WATER RIGHTS ADMINISTRATION  
 99 EAST VIRGINIA  
 PHOENIX, ARIZONA 85004

MICROFILMED

RECEIPT

| KIND ENTRY | FILE REFERENCE NO. |
|------------|--------------------|
| 55         | 613295             |
|            | THRU               |
| 55         | 613297             |

(3)

| FUND SOURCE | ACCOUNT NO. |         |      | INT. ACCT. | ITEM DESCRIPTION               | RATE           | \$ AMOUNT |
|-------------|-------------|---------|------|------------|--------------------------------|----------------|-----------|
|             | AGENCY      | CHAPTER | DIV. |            |                                |                |           |
|             |             |         |      |            | Filing Fee for Registration of | 10.00          | 30.00     |
|             |             |         |      |            | Existing Wells                 |                |           |
|             |             |         |      |            |                                | WAITER PAYMENT |           |
|             |             |         |      |            |                                | GUESTS 3       |           |
|             |             |         |      |            |                                | CHK NO 2604    |           |
|             |             |         |      |            | File No. D(7-20)21 bdb         | 55-1           | 30.00     |
|             |             |         |      |            | D(7-20)21 bda                  | TAX            | 0.00      |
|             |             |         |      |            | D(7-20)21 bbc                  | TOTL           | 30.00     |
|             |             |         |      |            |                                | GEN.CHEK       | 30.00     |
|             |             |         |      |            |                                | # 634 R        | 8:32      |

Check # 2604

TOTAL

\$ 30.00

7/26/82

jc

# RECEIPT

16067

R. BRUCE WHITING          ATTOR.  
PAUL M. PETERSON OR BARRY M. HATCH  
4602 E. THOMAS ROAD  
PHOENIX, AZ.      85018

ATTOR.

STATE OF ARIZONA  
DEPARTMENT OF WATER RESOURCES  
OPERATIONS DIVISION  
15 SOUTH 15TH AVENUE  
PHOENIX, ARIZONA 85007  
(602) 542-1581

ENTRY CODE 55

RE: KAIBAB INDUSTRIES, INC.

FILE NO. 55-613295 THRU 613297    55-645601 THRU THRU 645607    55-805785

| ITEM DESCRIPTION                | RATE | AMOUNT |
|---------------------------------|------|--------|
| CHANGE OF WELL OWNERSHIPs       |      | 10.00  |
| REG # 55613295 THRU 613297      |      |        |
| REG # 55-645601 THRU 645607     |      |        |
| REG # 55- <del>806</del> 805785 |      |        |
| FILE S      VARIOUS             |      |        |
|                                 |      |        |
|                                 |      |        |
|                                 |      |        |
|                                 |      |        |
|                                 |      |        |

CHECK NO. 2025

FEE ACCOUNT NO. \_\_\_\_\_

TOTAL \$

10.00

CHIT NO. \_\_\_\_\_

RECEIVED BY MBG

DATE

11/07/94

IPS 1821 - Rev. 4/91

**PAYED**