



Arizona Department of Water Resources  
Groundwater Management Support Section  
P.O. Box 458 • Phoenix, Arizona 85001-0458  
(602) 417-2470 • (800) 352-8488  
www.water.az.gov

**RECEIVED**

Request to Change Well Information

MAR - 2 2006

**INFORMATION MANAGEMENT**

- ❖ 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.A.C. R12-15-151(B)(4)(a), A.R.S. § 45-113(B)
- \*\* PLEASE PRINT CLEARLY \*\***

FILE NUMBER  
WELL REGISTRATION NUMBER  
**55-580752**

**SECTION 1. REGISTRY INFORMATION**

<b>Well Owner</b>		<b>Location of Well</b>					
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL		WELL LOCATION ADDRESS (IF ANY)					
MAILING ADDRESS		12897 N. Tonto Road					
CITY / STATE / ZIP CODE		TOWNSHIP (N/S)	RANGE (E/W)	SECTION	180 ACRE	40 ACRE	10 ACRE
ANSWERED MAR 15 2006		16N	4W	36	SE 1/4	NW 1/4	NW 1/4
CONTACT PERSON NAME AND TITLE		LATITUDE		LONGITUDE			
TELEPHONE NUMBER		Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
FAX		COUNTY ASSESSOR'S PARCEL ID NUMBER					
		BOOK		MAP	PARCEL		
		300		28	027		
		COUNTY WHERE WELL					
		1036					

KRIS A. JAMSA 09-05  
DEBORAH JAMSA  
7867 E. VISAO DR.  
SCOTTSDALE, AZ 85262-2770

91-170/1221 AZ  
7739

Date 2/28/06

Pay to the order of ARIZONA DEPT OF WATER RESOURCES \$ 10 -

Bank of America

ACH R/T 122101706

Memo Well Change

ge of Well Information  
use, etc.) (Fill out Section 4)

the new

**\$10 FEE**

ON, OR INDIVIDUAL

ROC LICENSE CATEGORY

FAX

**SECTION 3. STATEMENT OF CHANGE OF WELL OWNERSHIP (\$10 Fee Required)**

If this change pertains to more than one well and the names are the same, only one \$10 fee is required.

**\$10 FEE**

<b>Previous Well Owner</b>		<b>New Well Owner</b>	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL		FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL	
Ray Sucato		KRIS JAMSA	
MAILING ADDRESS		MAILING ADDRESS	
12897 N. Tonto Road		7867 EAST VISAO DR	
CITY / STATE / ZIP CODE		CITY / STATE / ZIP CODE	
Prescott AZ 86305		SCOTTSDALE, AZ 85262	
CONTACT PERSON NAME AND TITLE		CONTACT PERSON NAME AND TITLE	
Ray Sucato			
TELEPHONE NUMBER	FAX	TELEPHONE NUMBER	FAX
928-821-1850		480-473-8160	

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

**NO FEE**

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	
I HEREBY CERTIFY that the above statements are true to the best of my knowledge and belief.	
TYPE OR PRINT NAME AND TITLE	SIGNATURE OF WELL OWNER
Ray Sucato	[Signature]
	DATE



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WELL REGISTRATION NUMBER

55-580752

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- ❖ You must include with your Notice:
  - check or money order for any required fee
- ❖ Authority for fee: A.A.C. R12-15-151(B)(4)(a), A.R.S. § 45-113(B)

\*\* PLEASE PRINT CLEARLY \*\*

SECTION 1. REGISTRY INFORMATION	
<b>Well Owner</b>	<b>Location of Well</b>
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL	WELL LOCATION ADDRESS (IF ANY) 12897 N. Tonto Road
MAILING ADDRESS	TOWNSHIP (N/S) RANGE (E/W) SECTION 160 ACRE 40 ACRE 10 ACRE 16N 4W 36 SE ¼ NW ¼ NW ¼
CITY / STATE / ZIP CODE	LATITUDE LONGITUDE Degrees Minutes Seconds Degrees Minutes Seconds
CONTACT PERSON NAME AND TITLE	COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK 300 MAP 28 PARCEL 027
TELEPHONE NUMBER FAX	COUNTY WHERE WELL IS LOCATED Yavapai

**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)

SECTION 2. REQUEST TO CHANGE WELL DRILLING CONTRACTOR (\$10 Fee Required)	
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

SECTION 3. STATEMENT OF CHANGE OF WELL OWNERSHIP (\$10 Fee Required)	
If this change pertains to more than one well and the names are the same, only one \$10 fee is required.	
<b>Previous Well Owner</b>	<b>New Well Owner</b>
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Ray Sucato	FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Kais Tansa
MAILING ADDRESS 12897 N. Tonto Road	MAILING ADDRESS 7867 East Visas Dr
CITY / STATE / ZIP CODE Prescott AZ 86305	CITY / STATE / ZIP CODE SCOTTSDALE, AZ 85262
CONTACT PERSON NAME AND TITLE Ray Sucato	CONTACT PERSON NAME AND TITLE
TELEPHONE NUMBER FAX 928-821-1850	TELEPHONE NUMBER FAX 480-473-8160

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	
I HEREBY CERTIFY that the above statements are true to the best of my knowledge and belief.	
TYPE OR PRINT NAME AND TITLE Ray Sucato	SIGNATURE OF WELL OWNER Ray Sucato
DATE	

## ARIZONA DEPARTMENT OF WATER RESOURCES

Information Management Unit  
P O Box 458  
Phoenix, Arizona 85001-0458  
Telephone (602) 771-8631



JANET NAPOLITANO  
Governor

HERB GLENTHER  
Director

Date: 3-3-06

Information Management Unit cannot process your Request to Change Well Information. Statement of Change of Well Ownership (section 3) due to the following reason(s).

- ☒ The form provided by this agency for the stated purpose **is not** completed. Each highlighted area on the form **must be filled out by the requestor and signed by the previous or new owner**. Attachments are accepted but we will not accept attachments in lieu of a completed form. Uncompleted forms will be returned to the requestor.
- ☒ The well registration is a required field. You **did not** provide the number.
- ☐ There is a \$10.00 fee to process this form; the fee was not included. See Section 3 of the form.
- ☐ The registration number you provided has been cancelled. If the well has been drilled, the owner should contact the agency for more information on what is needed to bring the well into compliance with state statutes.
- ☒ The information you have provided does not allow us to transfer the well ownership. The legal description, which is the township, range, and section with the quarters, is a required field on the form and was not included; the names you submitted do not match our records or show no connection to the registration number. Known previous owners of the property would aid in the research for the correct well. You can include the assessor parcel number but **PLEASE REMEMBER**

- ▶ **We cannot search for a registered well by parcel numbers.**  
**We cannot transfer a registered well using parcel numbers only.**

The paperwork you submitted is being returned to you because you wrote the check. If you do not resubmit the form within two weeks, we will attempt to contact the new/previous owner for the needed information. By state statute the well owner is to supply the information to keep our well records updated (A.R.S. §45-593 (C) and A.R.S. §45-113) so you will want to resubmit the form. If you are unsure of the information to submit or need research on a registered well to complete your form, please fax a written request to Information Management staff at (602) 417-2421.

Thank you.

A handwritten signature in dark ink, appearing to be "Toni Bergeman".

Toni Bergeman  
Water Resource Technician

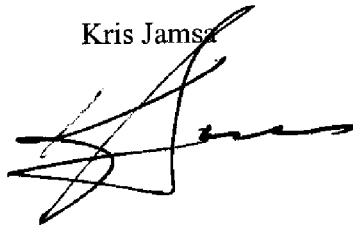
Arizona Department of Water Resources  
Box 458  
Phoenix AZ 85001

March 10, 2006

Please find my enclosed Request to Change Well Information. Per our phone conversation, I am providing this written request asking you to search for my 55-registration number to complete the form.

Thank you for your assistance.

Kris Jansa

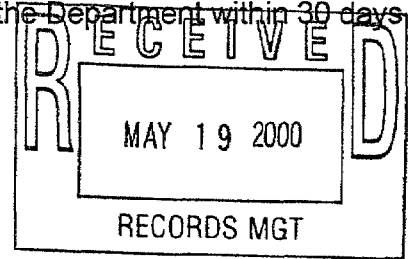
A handwritten signature in black ink, appearing to read 'Kris Jansa', written over the printed name.

ARIZONA DEPARTMENT OF WATER RESOURCES

500 North 3rd 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. DRILL-TECH, INC.  
P.O. BOX 3568  
CHINO VALLEY, AZ 86323-3568

2. Owner Name: Ray Sucato  
Address: 2675 W Hwy 89 # 1213 Sedona, Az 86336  
City State Zip

3. Location: 16 N N/S 4 W E/W 36 1/4 SE 1/4 NE 1/4 NW  
Township Range Section 10-acre 40-acre 160-acre

4. Well Registration No. 55-580752 (Required)

5. Permit No. \_\_\_\_\_ (If Issued)

DESCRIPTION OF WELL

6. Total depth of hole 190 ft.  
7. Type of casing Steel/PVC  
8. Diameter and length of casing 7 in. from 0 to 20, 4.5 in from 0 to 85  
9. Method of sealing at reduction points \_\_\_\_\_  
10. Perforated from 85 to 185, from \_\_\_\_\_ to \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_  
11. Size of cuts Fac Perf Number of cuts per foot \_\_\_\_\_  
12. If screen was installed: Length \_\_\_\_\_ ft. Diam \_\_\_\_\_ in. Type \_\_\_\_\_  
13. Method of construction Drilled  
(drilled, dug, driven, bored, jetted, etc)

14. Date started 5-10-00  
Month Day Year

15. Date completed 5-10-00  
Month Day Year

16. Depth to water 103 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: \_\_\_\_\_

ANSWERED MAY 16 2000

DO NOT WRITE IN THIS SPACE  
OFFICE RECORD

Registration No. 55- 580752

File No. B(16-4) 36 BAD

Received \_\_\_\_\_ By \_\_\_\_\_

Entered \_\_\_\_\_ By \_\_\_\_\_

# 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.

<b>From (feet)</b>	<b>To (feet)</b>	<b>Description of formation material</b>
0	130	Decomposed Granite
130	210	Decomposed Granite sand & Gravel
		GPM: 30+

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: DRILL-TECH, INC.

P.O. BOX 3568

Street

CHINO VALLEY, AZ 86323-3568

City

State

Zip

Phone No.

Garth R. Owens

Signature of Driller

5-1700

Date \_\_\_\_\_

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

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

**WELL REGISTRATION NO: 55-580752**

**AUTHORIZED DRILLER: DRILL-TECH, INC.**

**LICENSE NO: 239**

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

**WELL OWNER: RAY SUCATO 2675 W HWY 89 #1213 SEDONA, AZ 86336**

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

**SE ¼ of the NE ¼ of the NW ¼ Section 36 Township 16 NORTH Range 4 WEST**

**No. of wells in this project: 1**

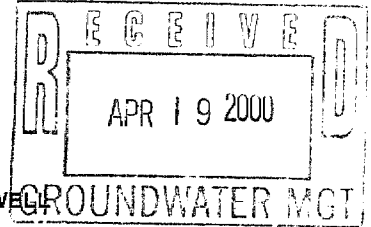
**THIS AUTHORIZATION EXPIRES AT MIDNIGHT ON THE 18TH DAY OF APRIL, 2001**

*ARD*  
**GROUNDWATER MANAGEMENT SUPPORT**

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



ARIZONA DEPARTMENT OF WATER RESOURCES  
GROUNDWATER MANAGEMENT SUPPORT SECTION  
MAIL TO: P. O. BOX 458, PHOENIX, ARIZONA 85001-0458  
FOR MORE INFORMATION CALL: MONICA ORTIZ 602-417-2470  
NOTICE OF INTENTION TO DRILL, DEEPEN, REPLACE OR MODIFY A WELL



PLEASE COMPLETE ALL ITEMS IN THE BOX BELOW DOWN TO COUNTY OR LOCAL AUTHORITY ENDORSEMENT. IF 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 SUBMISSION TO THE DEPARTMENT OF WATER RESOURCES. ITEMS C, D, E, AND F MAY BE AVAILABLE FROM YOUR COUNTY ASSESSOR'S OFFICE.

A. Ray Sucato 2675 W. Hwy 89 #1213 Sedona, Az 86336  
LANDOWNER'S NAME CURRENT MAILING ADDRESS CITY STATE ZIP

B. TELEPHONE NO. 520-284-3500 COUNTY ASSESSOR'S PARCEL ID INFORMATION:

C. WELL LOCATED IN Yavapai COUNTY D. 300-28-027 E. 36.47 OFFICIAL SEAL OR STAMP

WELL/LAND LOCATION (MUST BE COMPLETED AS REQUESTED):

F. SE  $\frac{1}{4}$  N  $\frac{1}{4}$  NE  $\frac{1}{4}$  OF SECTION 36 TOWNSHIP 10S RANGE 4 E/W  
10AC 40AC 160AC COUNTY OR LOCAL AUTHORITY ENDORSEMENT

CHECK ONE:

G. RECOMMEND APPROVAL \_\_\_\_\_; INSUFFICIENT INFORMATION TO MAKE A DETERMINATION \_\_\_\_\_; VARIANCE REQUIRED \_\_\_\_\_ (EXPLANATION ATTACHED)

H. DATE \_\_\_\_\_ AUTHORIZED SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_

1. OWNER OF WELL:

Ray Sucato  
NAME  
2675 W Hwy 89 #1213  
CURRENT MAILING ADDRESS  
Sedona, Az 86336  
CITY STATE ZIP

TELEPHONE NUMBER 520 284-3500

2. ACTION REQUESTED:

DRILL NEW WELL ☒ DEEPEN \_\_\_\_\_  
MODIFY \_\_\_\_\_ REPLACE \_\_\_\_\_

WELL REGISTRATION NO 55- \_\_\_\_\_

FOR A REPLACEMENT WELL PROVIDE:  
MAX. CAPACITY OF THE ORIGINAL WELL \_\_\_\_\_  
GALLONS PER MINUTE;

DISTANCE FROM THE ORIGINAL WELL: \_\_\_\_\_ FEET

3. CONSTRUCTION WILL START ABOUT:

MONTH 04 YEAR 00

4. TYPE OF CASING FOR PROPOSED WELL:

SURFACE CASING: Steel  
DIAMETER: 7 " DEPTH: 20 "

DOWNHOLE CASING: PVC  
DIAMETER: 4.5 " DEPTH: 300 "

5. DESIGN PUMP CAPACITY:

104 GALLONS PER MINUTE

6. LESSEE OF LAND OF WELLSITE:

Same  
NAME

CURRENT MAILING ADDRESS

CITY STATE ZIP

TELEPHONE: \_\_\_\_\_

7. PRINCIPAL USE OF WATER: (BE SPECIFIC)

Domestic

8. OTHER USES OF WATER: (BE SPECIFIC)

N/A

9. PLACE OF USE (LEGAL DESCRIPTION OF LAND):

SE  $\frac{1}{4}$  N  $\frac{1}{4}$  NE  $\frac{1}{4}$  SECTION 36  
10AC 40AC 160AC  
TWN SHP 10S RNG 4 E/W

10. TYPE OF WELL (CHECK ONE):

EXEMPT ☒ NON-EXEMPT \_\_\_\_\_

11. CHECK ONE:

RESIDENTIAL ☒ STOCKWATER \_\_\_\_\_  
OTHER \_\_\_\_\_

12. IS THE PROPOSED WELLSITE WITHIN 100 FEET OF A SEPTIC TANK SYSTEM, SEWER DISPOSAL AREA, LANDFILL, HAZARDOUS MATERIALS OR PETROLEUM STORAGE AREAS AND TANKS?

YES \_\_\_\_\_ NO ☒

13. DRILLING FIRM:

Drill-Tech Inc.

NAME P.O. Box 3568

MAILING ADDRESS

Chino Valley, Az 86323

CITY STATE ZIP

(520) 636-8006

TELEPHONE NO. 239

DWR LICENSE NUMBER 44653

ROC LICENSE CATEGORY

FOR DEPARTMENT USE ONLY  
REGISTRATION NO. 55- 580752  
DATE FILED 4-19-00  
FILE NO. 3(164)36 bad  
AMA/INA \_\_\_\_\_  
W/S 05 S/B \_\_\_\_\_  
PROCESSED BY em  
DATE MAILED 4-25-00

I STATE THAT THIS NOTICE IS FILED IN COMPLIANCE WITH A.R.S. § 45-596, 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.

RAY SUCATO  
14. TYPE OR PRINT NAME AND TITLE

15. SIGNATURE OF LANDOWNER/LESSEE OF WELLSITE

16. DATE 4-14-00



## APPLICATION GUIDELINES

In accordance with Arizona Revised Statutes ("A.R.S.") §§ 41-1008 and 1079, the Department of Water Resources (Department) provides the following information regarding the application review process for authority to drill.

### NECESSARY STEPS & INSTRUCTIONS TO OBTAIN DRILLING AUTHORITY

1. Pursuant to A.R.S. § 45-596, a person may not drill, cause to be drilled, deepen or modify any well for which a permit is not required without first filing a Notice of Intent to Drill with the Department. Only a well drilling contractor licensed in the State of Arizona or a single well licensee (a person licensed to drill or modify one exempt well on his or her own property) is authorized to drill, deepen or modify a well. Drilling may not begin until 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, and which authorizes the drilling of the specific well in a specific location. To assist you in understanding the requirements for this application, copies of A.R.S. § 45-596 and Arizona Administrative Code ("A.A.C.") R12-15-810 are available at the Department bookstore (602-417-2450 x7127).
2. If replacing, deepening, or modifying an existing well, provide the registration number of the existing well in item 2. A replacement well is one located no more than 660 feet from the original well and that is not expected to annually withdraw more groundwater than historically withdrawn from the original well.
3. Information to complete items 3, 4, 5 and 13 may be available from your driller.
4. Information to complete items 9 and 12 may be available from your County Assessor's Office.
5. For item 10, in an Active Management Area, A.R.S. § 45-454 only allows non-irrigation uses for "exempt" wells. If the proposed use includes the growing of 2 or more acres of plants for sale or human/animal consumption (irrigation use), the well does not qualify as an exempt well.
6. An exempt well, referred to in Item 10, means a well with a pump with a maximum capacity of not more than thirty-five gallons per minute and used for non-irrigation purposes.
7. For item 11, in an Active Management Area, A.R.S. § 45-454 allow up to 56 acre feet per year of pumping from a domestic (residential) or stock watering exempt well, and up to 10 acre ft per year from an exempt well used for other (usually commercial non-irrigation) purposes.
8. If any water from a proposed well on a parcel of twenty or fewer acres will be used for domestic purposes, as defined in § 45-454, the applicant must submit a well site plan of the property. The plan must be on an 8½" x 11" piece of plain paper with representation of the locations of all structures and proximity of adjacent lot lines, to scale. It must include the county assessor's parcel identification number. The plan must show the proposed well location and the location of any septic tank or sewer system that is either located on the property or within one hundred feet of the proposed well site, as well as indicating the measured shortest distance between the proposed well and existing septic tank system. **The plan must demonstrate that the well will not be drilled within one hundred feet of any septic or sewer system.**
9. The site plan 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. Endorsement by the county/local authority is based solely on the best available judgement that the proposed 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. In areas where there is no local or county authority that controls installation of septic tanks or sewer systems, or if the health authority is unable to determine whether the proposed well location complies with state and local requirements, the applicant must apply for approval directly to the Department of Water Resources.
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 his or her behalf, must accompany the notice.
11. Please mail **two original Notices with original signatures and two site plans** and, in accordance with A.R.S. § 45-113, 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.
12. Arizona Revised Statute § 45-596(D) provides that the Director of the Department is to determine whether or not all information required on this form has been submitted. If not, the person filing the Notice will be notified, and the drilling or modification of the well may **not** proceed.
13. This form is not applicable for non-exempt wells (those yielding more than thirty-five gallons per minute) within an Active Management Area. Contact Groundwater Management for further information regarding the appropriate notice to file with the Department.

### TIME FRAME FOR REVIEW OF YOUR APPLICATION

Within 15 days after receipt of your Notice of Intention the Arizona Department of Water Resources ("Department") will determine whether your application should be granted or denied, unless this time is extended for lack of a complete application. If your application is incomplete, the Department will notify you in writing and will specify what information is necessary to make the application complete. Until the missing information is received, the time frame for review of your application will be suspended. Your application will not be complete until all of the requested information is received. If you do not supply the missing information within sixty (60) days, the Department may deem your application withdrawn and close the file.

At the end of its review, the Department will send you a written notice either granting or denying your application for drilling authority. If your application is approved, the Drill Card will be mailed directly to the drilling contractor. If denied, the Department's notice will state justification for the denial and an explanation of your right to appeal.

### CONSTRUCTION AND FOLLOW UP REQUIREMENTS

1. Construction and abandonment standards for wells, must be in accordance with Department Regulations. A.R.S. § 45-594 and Arizona Administrative Code R12-15-811 require the well to be constructed with a twenty foot steel surface seal casing, including a one foot steel stickup and one and one-half inches of grout seal around the casing from the surface to a depth of twenty feet, unless a variance is granted (see A.R.S. § 45-596 (G) for procedure to follow in requesting a variance).
2. Pursuant to § 45-596(E), the drilling, deepening or modification of the well must be completed within one year of the date of the Notice of Intent. If the well is not completed within one year, a new Notice of Intent must be filed before proceeding with further construction.
3. 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 is later proposed to be converted to use for domestic purposes as defined in § 45-454, the well owner must file a Notice of Intention to Drill and comply with the requirements of § 45-596 before the well is converted and any water from that well is used for domestic purposes.
4. Within thirty days after installation of pumping equipment, the registered well owner must file a Completion Report with the Department. The person to whom a well is registered also must notify the Department of a change in ownership or a change in data relating to this well.

**ARIZONA DEPARTMENT OF WATER RESOURCES**

500 North 3rd Street, Phoenix, Arizona 85004

Telephone (602) 417-2470

Fax (602) 417-2422

April 26, 2000



**JANE DEE HULL**  
Governor

**RITA P. PEARSON**  
Director

RAY SUCATO  
2675 W HWY 89 #1213  
SEDONA, AZ 86336

Registration No. 55-580752

File No. B(16-4) 36 BAD

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 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.

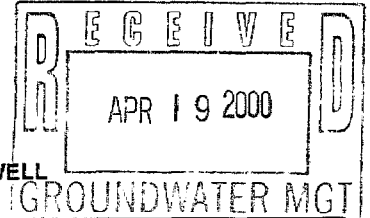
Sincerely,

A handwritten signature in cursive script that reads "Gloria Moss".

Gloria Moss  
Water Resource Technician  
Groundwater Management Support Section

Enclosures

ARIZONA DEPARTMENT OF WATER RESOURCES  
GROUNDWATER MANAGEMENT SUPPORT SECTION  
MAIL TO: P. O. BOX 458, PHOENIX, ARIZONA 85001-0458  
FOR MORE INFORMATION CALL: MONICA ORTIZ 602-417-2470  
NOTICE OF INTENTION TO DRILL, DEEPEN, REPLACE OR MODIFY A WELL



PLEASE COMPLETE ALL ITEMS IN THE BOX BELOW DOWN TO COUNTY OR LOCAL AUTHORITY ENDORSEMENT. IF 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 SUBMISSION TO THE DEPARTMENT OF WATER RESOURCES. ITEMS C, D, E, AND F MAY BE AVAILABLE FROM YOUR COUNTY ASSESSOR'S OFFICE.

A. Ray Sucato 2675 W. Hwy 89 #1213 Sedona, Az 86336  
LANDOWNER'S NAME CURRENT MAILING ADDRESS CITY STATE ZIP

B. TELEPHONE NO. 520-284-3500

COUNTY ASSESSOR'S PARCEL ID INFORMATION:

C. WELL LOCATED IN Yavapai COUNTY D. 300-28-027 E. 36.47  
BOOK MAP PARCEL # OF ACRES

OFFICIAL  
SEAL OR  
STAMP

WELL/LAND LOCATION (MUST BE COMPLETED AS REQUESTED):

F. SE  $\frac{1}{4}$  NW  $\frac{1}{4}$  OF SECTION 36 TOWNSHIP 16 S RANGE 4 E  
10AC 40AC 160AC COUNTY OR LOCAL AUTHORITY ENDORSEMENT

CHECK ONE:

G. RECOMMEND APPROVAL \_\_\_\_\_; INSUFFICIENT INFORMATION TO MAKE A DETERMINATION \_\_\_\_\_; VARIANCE REQUIRED \_\_\_\_\_ (EXPLANATION ATTACHED)

H. DATE \_\_\_\_\_ AUTHORIZED SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_

1. OWNER OF WELL:

Ray Sucato  
NAME  
2675 W Hwy 89 #1213  
CURRENT MAILING ADDRESS  
Sedona, Az 86336  
CITY STATE ZIP

TELEPHONE NUMBER 520-284-3500

6. LESSEE OF LAND OF WELLSITE:

Sand  
NAME

CURRENT MAILING ADDRESS

CITY STATE ZIP

TELEPHONE

9. PLACE OF USE (LEGAL DESCRIPTION OF LAND):

SE  $\frac{1}{4}$  NE  $\frac{1}{4}$  SECTION 36  
10AC 40AC 160AC  
TOWNSHIP 16 S RANG 4 E

10. TYPE OF WELL (CHECK ONE):

EXEMPT X NON-EXEMPT \_\_\_\_\_

11. CHECK ONE:

DRILL-TECH INC.

P. O. BOX 3568 520-636-8006  
CHINO VALLEY, AZ 86323

6382

PAY  
TO THE  
ORDER OF

Az DWR

DATE 4-17-00

91-504.1221  
50

Ten - dollars & 0/100 \$ 10.00

DOLLARS

STOCKMEN'S  
BANK

Chino Valley Branch 1289 N. Hwy. 89  
Chino Valley, AZ 86323

FOR

5. DESIGN PUMP CAPACITY:

104 GALLONS PER MINUTE

I STATE THAT THIS NOTICE IS FILED IN COMPLIANCE WITH A.R.S. § 45-596. 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.

RAY SUCATO  
14. TYPE OR PRINT NAME AND TITLE

[Signature]  
15. SIGNATURE OF LANDOWNER/LESSEE OF WELLSITE

4-14-00  
16. DATE