

Run Date: 06/23/2006

AZ DEPARTMENT OF WATER RESOURCES

WELL REGISTRY REPORT - WELLS55

Location B 1.0 5.0 22 B B C Well Reg.No 55 - 629629 AMA PHOENIX AMA

Registered Name: JOE KANOCZ
Name: PO 194
File Type: REGISTERED WELL
Application/Issue Date: 02/23/1982
TONOPAHA AZ 85354

Owner: OWNER
Driller No.: 0
Driller Name:
Driller Phone:
County: MARICOPA
Well Type: NON-EXEMPT
SubBasin: HASSAYAMPA
Watershed: LOWER GILA 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: 100.00 Case Diam: 6.00 Tested Cap: 15.00
Pump Cap.: 15.00 Case Depth: 100.00 CRT
Draw Down: 0.00 Water Level: 50.00 Log
Acres Irrig: 5.00 Finish: STEEL - PERFORATED OR SLOTTED CASING

Contamination Site: NO - NOT IN ANY WQARF SITE

Comments

Current Action

6/6/2006 700 SITE VERIFIED AS ACCURATE
Action Comment: SSW

Action History

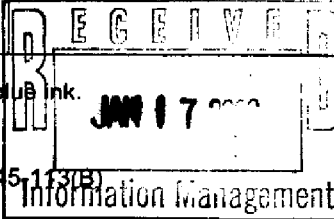
6/23/2006 880 CHANGE IN CONTAMINATION SITE
Action Comment: OLD WQARF code: null
6/6/2006 855 CHANGE OF WELL LEGAL DESCRIPTION
Action Comment: OLD LEGAL DESC: B(1.0-5.0) 22 BBD.SSW
1/19/2006 860 CHANGE OF WELL OWNERSHIP
Action Comment: DH
9/1/1977 755 WELL CONSTRUCTION COMPLETED
Action Comment:

Change To Legal
SSW



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

Request to Change Well Information



FILE NUMBER
WELL REGISTRATION NUMBER 55-429629

- 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 ****

SECTION 1. REGISTRY INFORMATION

Well Owner FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL JOE KANOLZ		Location of Well WELL LOCATION ADDRESS (IF ANY)					
MAILING ADDRESS P.O. BOX 194		TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE
CITY / STATE / ZIP CODE		1N	5W	22	B 1/4	B 1/4	D 1/4

K JOE KANOLZ
 P.O. BOX 194
 TONOPAH, AZ, 85354

DATE JAN 17, 2006 1128
 16-7755/3220

PAY TO THE ORDER OF ADWR
Ten & 00/100

ANSWERED JAN 17 2006 \$ 10.00

CF Continental Federal Credit Union
 CONTINENTAL CENTER OFFICE
 500 JEFFERSON, SUITE 250
 HOUSTON, TX 77002

MEMO [REDACTED]

LONGITUDE	Degrees		Minutes	Seconds
NUMBER	PARCEL			
Type of Well Information (use, etc.) (Fill out Section 4)				
to the new				\$10 FEE
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)

\$10 FEE

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

Previous Well Owner		New Well Owner	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Elen Alexander		FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL JOE KANOLZ	
MAILING ADDRESS Star Rt Box 600		MAILING ADDRESS P.O. Box 194	
CITY / STATE / ZIP CODE TONOPAH, AZ 85354		CITY / STATE / ZIP CODE TONOPAH, AZ 85354	
CONTACT PERSON NAME AND TITLE		CONTACT PERSON NAME AND TITLE JOE KANOLZ - OWNER	
TELEPHONE NUMBER	FAX	TELEPHONE NUMBER 602-790-5762	FAX

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

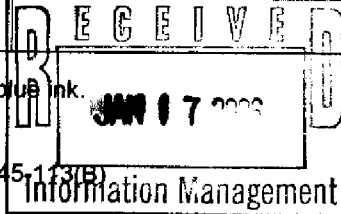
I HEREBY CERTIFY that the above statements are true to the best of my knowledge and belief.

TYPE OR PRINT NAME AND TITLE	SIGNATURE OF WELL OWNER	DATE
	<u>Joe Kanolz</u>	<u>1-17-2006</u>



Arizona Department of Water Resources
Groundwater Management Support Section
P.O. Box 458 • Phoenix, Arizona 85001-0458
(602) 417-2470 • (800) 352-8488
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Request to Change Well Information



FILE NUMBER
WELL REGISTRATION NUMBER 55-629629

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 - 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	
Well Owner	Location of Well
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL JOE KANOLZ	WELL LOCATION ADDRESS (IF ANY)
MAILING ADDRESS P.O. BOX 194	TOWNSHIP (N/S) RANGE (E/W) SECTION 160 ACRE 40 ACRE 10 ACRE 1N SW 22 B 1/4 B 1/4 D 1/4
CITY / STATE / ZIP CODE TONOPAH, AZ 85354	LATITUDE LONGITUDE Degrees Minutes Seconds Degrees Minutes Seconds
CONTACT PERSON NAME AND TITLE	COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL
TELEPHONE NUMBER FAX 602-790-5762	COUNTY WHERE WELL IS LOCATED

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 <u>prior</u> to the commencement of well drilling or abandonment.	
\$10 FEE	
Current Well Drilling Contractor	New Well Drilling Contractor
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.	
\$10 FEE	
Previous Well Owner	New Well Owner
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Elen Alexander	FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL JOE KANOLZ
MAILING ADDRESS Star Rt Box 600	MAILING ADDRESS P.O. BOX 194
CITY / STATE / ZIP CODE TONOPAH, AZ 85354	CITY / STATE / ZIP CODE TONOPAH, AZ 85354
CONTACT PERSON NAME AND TITLE	CONTACT PERSON NAME AND TITLE JOE KANOLZ - OWNER
TELEPHONE NUMBER FAX	TELEPHONE NUMBER FAX 602-790-5762

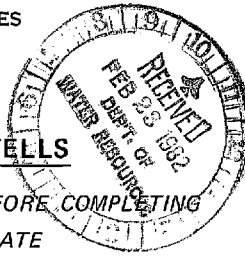
SECTION 4. CHANGE OF WELL INFORMATION (No Fee Required)	NO FEE
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NOTE: Applies only to wells that have already been drilled. For proposed wells, an amended Notice of Intent to Drill a Well must be filed.

EXPLAIN

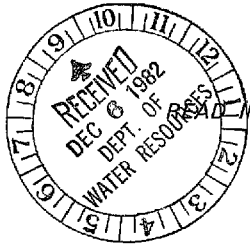
I HEREBY CERTIFY that the above statements are true to the best of my knowledge and belief.

TYPE OR PRINT NAME AND TITLE	SIGNATURE OF WELL OWNER Joe Kanolz	DATE 1-17-2006
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REGISTRATION OF EXISTING WELLS

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



28

REGISTRATION FEE (CHECK ONE)
EXEMPT WELL (NO CHARGE)
NON-EXEMPT WELL \$10.00

FOR OFFICE USE ONLY
REGISTRATION NO. 55- 629629
FILE NO. BC(1-5)22 bbd
FILED 2-23-82 AT 1030A
(DATE) (TIME)
INA
AMA Phoenix

1. Name of Registrant:

Ilen Alexander
Star Rt Box 600 Lucafeh Arizona 85354
(Address) (City) (State) (Zip)

2. File and/or Control Number under previous groundwater law:

B15 22 BBD 35-41062
(File Number) (Control Number)

3. a. The well is located within the SE $\frac{1}{4}$ NW $\frac{1}{4}$ NW $\frac{1}{4}$, Section # 22,
of Township 1N N/S, Range 5W E/W, G & SRB & M, in the
County of Maricopa.

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

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

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

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 100 feet
b. Diameter of casing 6" inches
c. Depth of casing 100 feet
d. Type of casing steel
e. Maximum pump capacity 15 gallons per minute.
f. Depth to water 50' feet below land surface.
g. Date well completed 9 (Month) 1977 (Year)

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

1/4 1/4 1/4, Section _____ Township _____ Range _____
1/4 1/4 1/4, Section _____ Township _____ Range _____

Attach additional sheet if necessary.

9. DATE 2-20-82 SIGNATURE OF REGISTRANT Ilen Alexander

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

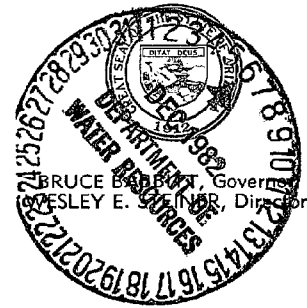
1. The Registrant must be the owner of the well and may be an individual, public or private corporation, company, partnership, firm, association, society, estate, trust, any other private organization or enterprise, the United States, any state, territory or country or a governmental entity, political 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.

State of Arizona

DEPARTMENT OF WATER RESOURCES

99 E. Virginia Avenue, Phoenix, Arizona 85004

*Check #
209*



November 12, 1982

Mr. Glen Alexander
Star Route, Box 600
Tonopah, AZ 85354

Dear Mr. Alexander:

We have recently received your registration of an existing non-exempt well. You apparently overlooked the requirement to submit a registration fee.

Consequently, we return the well registration to you and request that you remit the required fee. To insure the timely filing of your registration, please return these forms since our date stamp is on them which shows the original date of receipt.

Sincerely,

Richard A. Gessner
Chief, Operations Branch

RAG/dc
Enclosure

Think Conservation!

Office of Director 255-1554

Administration 255-1550, Water Resources and Flood Control Planning 255-1566, Dam Safety 255-1541,
Flood Warning Office 255-1548, Water Rights Administration 255-1581, Hydrology 255-1586.

Glen R. Alexander
 Star Route Box 600
 Tonopah, AZ 85354

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

RECEIPT

KIND ENTRY	FILE REFERENCE NO.
55	629627
	THRU
55	629629

FUND SOURCE	ACCOUNT NO.			INT. ACCT.	ITEM DESCRIPTION	RATE	\$ AMOUNT
	AGENCY	CHAPTER	DIV.				
					Filing Fee for Registration of Existing Wells	10.00	30.00
					File No. B(1-5) 3 ccb		WRITER PAYMENT
					B(1-5) 3ccb		GUESTS 3
					B(1-52) 22 bbd		CHK NO 209
							55-1 30.00
							TAX 0.00
							TOTL 30.00
							GEN.CHEK 30.00

Check # 209
 12-16-82 vf

TOTAL \$ 30.00