



Arizona Department of Water Resources
 Water Management Division
 P.O. Box 36020 Phoenix, Arizona 85067-6020
 (602) 771-8500 • www.azwater.gov

**Notice of Intent to
 Abandon a Well**

**FEE
 \$150.00**

- ❖ Review instructions and the Well Abandonment Handbook prior to completing form with black or blue ink.
- ❖ You **must** include with your Notice:
 - Well construction diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.
- ❖ Authority for fee: A.R.S. §45-113 and A.A.C. R12-15-104

**** PLEASE PRINT CLEARLY ****

AMA / INA	B	SB
RECEIVED	DATE	WS
ISSUED	DATE	WQARF CERCLA

FILE NUMBER
WELL REGISTRATION NUMBER
55 - 580477

SECTION 1. REGISTRY INFORMATION

Well Type CHECK ONE		Location of Well						
<input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Monitor / Piezometer <input type="checkbox"/> Stock <input type="checkbox"/> Geotechnical <input type="checkbox"/> Irrigation <input type="checkbox"/> Mineral Exploration <input type="checkbox"/> Municipal <input type="checkbox"/> Other (please specify):		WELL LOCATION ADDRESS (IF ANY) 668 N. Shady Lane, Tonto Basin, AZ						
ORIGINAL WELL OWNER (IF KNOWN) Gary Uptain		TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE	
ORIGINAL WELL DRILLING FIRM (IF KNOWN) Burns Well Drilling		DRILL DATE (IF KNOWN) 4/25/2000	T6N	R10E	36	A ¼	C ¼	
			COUNTY ASSESSOR'S PARCEL ID NUMBER		COUNTY WHERE WELL IS LOCATED			
			BOOK	MAP	PARCEL	Gila		
			201	06	059U			
			LATITUDE			LONGITUDE		
			°	'	"N	°	'	
			Seconds	Seconds	Minutes	Seconds	"W	
			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):					

SECTION 2. OWNER INFORMATION

Well Owner		Landowner (if different from Well Owner)	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Gila County		FULL NAME OF COMPANY, GOVERNMENT AGENCY, OR INDIVIDUAL same	
MAILING ADDRESS 1400 E. Ash Street		MAILING ADDRESS	
CITY / STATE / ZIP CODE Globe, Arizona 85501		CITY / STATE / ZIP CODE	
CONTACT PERSON NAME AND TITLE Kevin Kenney, Rural Addressing Analyst		CONTACT PERSON NAME AND TITLE	
TELEPHONE NUMBER 928-402-8510	FAX 928-425-7714	TELEPHONE NUMBER	FAX

SECTION 3. ABANDONMENT AUTHORIZATION

Drilling Firm		Consultant (if applicable)	
NAME		CONSULTING FIRM none	
DWR LICENSE NUMBER	ROC LICENSE CATEGORY	CONTACT PERSON NAME	
TELEPHONE NUMBER	FAX	TELEPHONE NUMBER	FAX
E-MAIL ADDRESS			

SECTION 4.

Questions	Yes	No	If Yes:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be, or is contaminated?		no	EXPLAIN (ATTACH ADDITIONAL PAGE IF NECESSARY)
2. Is there another well name or identification number associated with this well? (e.g., Lot 3 Well, MW-1, etc.)		no	PLEASE STATE
3. Was the well casing video logged?			
4. Why is the well being abandoned?			flood mitigation project-house destroyed

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Provide a well construction diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.

SECTION 5. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE (I)				PERFORATION TYPE (I)					SLOT SIZE IF ANY (inches)	
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
surf	31 ft	10" dia	0	1 ft	10"	X									X	

Condition of casing: Good Fair Poor

Existing Annular Material (to the best of your knowledge)

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (T)							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				

SECTION 6. PROPOSED WELL ABANDONMENT DESIGN (attach additional page if needed)

DATE ABANDONMENT IS TO BEGIN

Refer to ADWR's Well Abandonment Handbook for additional information.

Casing Treatment					Sealing or Fill Material											
DEPTH FROM SURFACE		TREATMENT TYPE (I)				DEPTH FROM SURFACE		MATERIAL TYPE (I)							MIXING RATIO by (check one) <input type="checkbox"/> Weight <input type="checkbox"/> Volume	ESTIMATED VOLUME OF MATERIAL (cubic feet)
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING IS TO BE PERFORATED, DESCRIBE SPACING AND SIZE OF PERFORATIONS TO BE ADDED	FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS BENTONITE		

Proposed Abandonment Method (See Well Abandonment Handbook)

Emplacement Method of Sealing or Fill Material

CHECK ONE
 Standard Method Alternative 4: Other (please specify):
 Alternative 1 Variance Option *
 Alternative 2 Alternative 5:
 Alternative 3 Variance Option 1* * requires a letter requesting a variance
 Variance Option 2*

CHECK ONE
 Gravity
 Pressure Grouting
 Tremie Pumped
 Other (please specify):

REMARKS

I state that this notice is filed in compliance with A.R.S. § 45-594 and A.A.C. R12-15-816 and is complete and correct to the best of my knowledge and belief.

TYPE OR PRINT NAME AND TITLE	SIGNATURE OF WELL OWNER	DATE
TYPE OR PRINT NAME AND TITLE	SIGNATURE OF LANDOWNER, IF APPLICABLE (SEE INSTRUCTIONS)	DATE