PLEASE COMPLETE. SUBMIT THE ORIGINAL AND N A COPY FOR YOUR RECORDS State of California, State Water Resources Control Board, Division of Water Rights

P.O. BOX 2000, SACRAMENTO, CA 95812-2000

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

(GROUNDWATER RECORDATION PROGRAM)

G193396

If the owner information below is wrong or missing, please correct. OWNER(S) OF RECORD LA COUNTY WATERWORKS DIST NO 24

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING:

LA COUNTY WATERWORKS DIST NO 24 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well ÑO. 5

P

RECORDATION NO: G193398 CONTACT PHONE NO: (818) 458-7156

State Well Number 05N/10W-09H01 S Parcel Number 2840-002-018

DEADLINE: Notices must be received no later than June 30, 2007 in order to be recorded.

REQUIRED FEES: A filling fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

If the above information is inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the coming

1. TYPE OF DIVERSION C Groundwater extraction or Surface diversion		
2. OWNERSHIP. Person listed below is:		41
Owner of land on which well or point of diversion is located, and is extracting/diverting water.		·
Lessee of land on which well or point of diversion is located, and is extracting/diverting water.	147:	acre-fee!
 Owner of land, but lessee is extracting/diverting water. 	10 T	cubic-fee
Other: Please explain:	(Must be a specific number)	☐ gallfons
AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR		
5. METHOD OF MEASUREMENT X Water Meter D Power Meter Non-metered or Estimated	Annual quantity	☐ acre-feet
3. TYPE OF WATER USE	Season of diversion	🗖 cubic-feet
7. ACTION REQUESTED (Check one):	Begin. :: End	[] gallons
☐ Reopen file. (Fee required)	Maximum rate of diversion	
☐ Close this file: (No fee required)		
Record my water use. (Fee required)	•	-
Do not record my water use but keep my name on mailing list. (No fee required)		
D not record its water use but seep my harme on maining list. (No like required)		
Fransfer this file to:	· 1	
(NEW OWNER'S FIRST NAME) (M, NAME) Company Name:	(LAST NAME)	
Address:	: /	•
(MAILING ADDRESS) (Telephone: () (Effective Date:	CITY) (STATE)	(ZIP CODE)
. SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new la	and impation, new method of irrination, et	c) or any other com
	:	o, o, any on o, o
		·
CERTIFICATION AND SIGNATURE: certify that the forgoing statements are true and correct to the	best of my knowledge.	
Signature: A lawy A Jahry Date	6/5/02	
	1 1 550 0 50	,
rinted Name (FIRST NAME) (M. NAME)	(LAST NAME	<u> </u>
(AT INVER)	(LAST NAME ,	
Company Name: THIS SPACE FOR OFFICE USE O		

P.O. BOX 2000, SACRAMENTO, CA 95812-2000 Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov

ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

(GROUNDWATER RECORDATION PROGRAM)

G192550 2007

If the owner information below is wrong or missing, please correct. OWNER(S) OF RECORD LA COUNTY WATERWORKS DIST NO 27

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING:

L A COUNTY WATERWORKS DIST NO 27 909 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well NO 3

RECORDATION NO: G192550 CONTACT PHONE NO: (626) 458-7157

State Well Number 05N/10W-07R S

Parcel Number

DEADLINE: Notices must be received no later than June 30, 2007 in order to be recorded.

REQUIRED FEES: A filling fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

SACE DEAD THE OFFICE ALL MICONATION ON THE DESCRIPTION OF THE DESCRIPT

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEF	ORE COMPLETING THIS NOTICE	re
in the above information is inaccurate, please line it out in red and provide current information. Notify this office	if ownership or address changes occ	our during the coming
1. TYPE OF DIVERSION ★ Groundwater extraction or ☐ Surface diversion		
2. OWNERSHIP. Person listed below is:	_	-
Owner of land on which well or point of diversion is located, and is extracting/diverting water.		
- The state of the	530	acre-leet
Owner of land, but lessee is extracting/diverting water.	(Must be a specific number)	. 🗆 cubic-feet
Other Please explain: 3. AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR	(mast be a specific flottloct)	□ gallions
4. AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR		
5. METHOD OF MEASUREMENT Water Meter Power Meter Non-metered or Estimated	Annual quantity	, □ acre-feet
6. TYPE OF WATER USE Agricultural Domestic or Municipal Other:	Season of diversion	☐ .cubic-feet
7. ACTION REQUESTED (Check one):	Begin	'□ gallons
☐ Reopen file. (Fee required)	End Maximum rate of diversion	_
☐ Close this file. (No fee required)		
K Record my Water use. (Fee required)		•
☐ Do not record my water use but keep my name on mailing list. (No fee required)	The second secon	•
En and the second of the second with the second of the sec		
Transfer this file to:	en e	
(NEW OWNER'S FIRST NAME) (M. NAME) Company Name:	(LAST NAME)	
Address:	* * * · · · · · · · · · · · · · · · · ·	
(MAILING ADDRESS) (C	ITY) (STATE) (Z	(IP CODE)
Telephone: () Effective Date:		<u> </u>
O SIDDI FIITLI MEGDALATION	en e	
8. SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new land	d irrigation, new method of irrigation, etc.	or any other comments
9. CERTIFICATION AND SIGNATURE: I certify that the forgoing statements are true and correct to the b	sort of my lenguidadae	•
	of I my knowledge.	
Signature: Date Date	0/5/00	
Printed NameNANTEL	1 AFFERTY	
(FIRST NAME) (M. NAME)	(LAST NAME	
Company Name: THIS SPACE FOR OFFICE USE OF	(LY R. AMT:	
		

PLEASE COMPLETE. SUBMIT THE ORIGINAL AND M 3 A COPY FOR YOUR RECORDS State of California, State Water Resources Contie- doard, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000

info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov

ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

(GROUNDWATER RECORDATION PROGRAM)

If the owner information below is wrong or missing, please correct.

OWNER(S) OF RECORD LA COUNTY WATERWORKS DIST NO. 4

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING:

LA COUNTY WATERWORKS DIST NO. 4 900 S FREMONT AVE 9TH FL ALHAMBRÁ, CA 91803

Owner's Designation of Well 34-6

State Well Number 06N/12W-15H S

G193286

RECORDATION NO: G193286 CONTACT PHONE NO: (626) 458-7157

> Parcel Number 3025-053-278

DEADLINE: Notices must be received no later than June 30, 2007 in order to be recorded.

REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board, Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

	undwater extraction or 🏻 Surface diversion		
2. OWNERSHIP. Person listed		·	•
,	point of diversion is focated, and is extracting/diverting water.		
	r point of diversion is located, and is extracting/diverting water.	394	acre-feet
 Owner of land, but lessee is ext 	tracting/diverting water.	// / / / / / / / / / / / / / / / / / /	_
Other: Please explain:	· · · · · · · · · · · · · · · · · · ·	(Must be a specific number)	☐ gallions
	R EXTRACTED DURING CALENDAR YEAR	•	
	ER DIVERTED DURING CALENDAR YEAR	Annual quantity	□ acre-feet
TYPE OF WATER USE	Water Meter Power Meter Non-metered or Estimated	Season of diversion	cubic-feet
. ACTION REQUESTED (Check	Agricultural Domestic or Municipal Dother: Coroll	— Begin	gallons
Reopen file. (Fee required)	Conej.	End Maximum rate of diversion	
_ ** ** ** ** ** ** ** ** ** ** ** ** **	.'		
	•	'. ·	
Record my water use. (Fee req		• .	
☐ Do not record my water use but	t keep my name on mailing list. (No fee required)		
ransfer this file to:			•
ransfer this file to: Company Name:	(NEW OWNER'S FIRST NAME) (M. NAME)	(LAST NAME)	
		(LAST NAME)	
Company Name:	(NEW OWNER'S FIRST NAME) (M. NAME) (MAILING ADDRESS)	(CITY) (STATE)	(ZIP CODE)
Company Name:	(NEW OWNER'S FIRST NAME) (M. NAME) (MAILING ADDRESS)	(CITY) (STATE)	(ZIP CODE)
Company Name:Address:Telephone: ()	(NEW OWNER'S FIRST NAME) (M. NAME) (MAILING ADDRESS)	(CITY) (STATE)	·
Company Name: Address: Telephone: () SUPPLEMENTAL INFORMATI	(NEW OWNER'S FIRST NAME) (M. NAME) (MAILING ADDRESS) Effective Date:	(CITY) (STATE) ew land irrigation, new method of irrigation, e	·
Company Name: Address: Telephone: () SUPPLEMENTAL INFORMATI	(NEW OWNER'S FIRST NAME) (M. NAME) (MAILING ADDRESS) Effective Date: [ON. Please list any changes in your project since last year (new pump, not project since last year) [URE: I certify that the forgoing statements are true and correct to	ew land imgation, new method of irrigation, e	·
Company Name: Address: Telephone: () SUPPLEMENTAL INFORMATI CERTIFICATION AND SIGNAT	(NEW OWNER'S FIRST NAME) (M. NAME) (MAILING ADDRESS) Effective Date: ON. Please list any changes in your project since last year (new pump, not only the content of the	ew land imgation, new method of irrigation, e	·
Company Name: Address: Telephone: () SUPPLEMENTAL INFORMATI CERTIFICATION AND SIGNAT	(NEW OWNER'S FIRST NAME) (M. NAME) (MAILING ADDRESS) Effective Date: ION. Please ilst any changes in your project since last year (new pump, not project since last year) TURE: I certify that the forgoing statements are true and correct to the post of the	ew land imgation, new method of irrigation, e	·
Company Name: Address: Telephone: () SUPPLEMENTAL INFORMATI CERTIFICATION AND SIGNAT ignature: A A A	(NEW OWNER'S FIRST NAME) (M. NAME) (MAILING ADDRESS) Effective Date: ION. Please ilst any changes in your project since last year (new pump, not project since last year) TURE: I certify that the forgoing statements are true and correct to pate. Date (M. NAME)	(CITY) (STATE) ew land imgation, new method of irrigation, e the best of my knowledge. LAFFERTY	·

PLEASE COMPLETE. SUBMIT THE ORIGINAL AND M 3. A COPY FOR YOUR RECORDS
State of California, State Water Resources Cont. Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov

ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

(GROUNDWATER RECORDATION PROGRAM)

G193159

If the owner information below is wrong or missing, please correct. OWNER(S) OF RECORD L A COUNTY WATERWORKS DIST NO 39

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING:

L A COUNTY WATERWORKS DIST NO 39 900 S FREMONT AVE 9TH FL ALHAMBRA; CA 91803-1331

Owner's Designation of Well NO 1

RECORDATION NO: G193159 CONTACT PHONE NO: (818) 458-7158

State Well Number 09N/01W-31R S

Parcel Number

DEADLINE: Notices must be received no later than June 30, 2007 in order to be recorded.

REQUIRED FEES: A filling fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

	FORE COMPLETING THIS NOTIC	F
If the above information is inaccurate, please line it out in red and provide current information. Notify this offic year.	e if ownership or address changes occu	= ir during the coming
TYPE OF DIVERSION Groundwater extraction or ☐ Surface diversion	• • •	
2. OWNERSHIP. Person listed below is:		
Owner of land on which well or point of diversion is located, and is extracting/diverting water.		
☐ Lessee of land on which well or point of diversion is located, and is extracting/diverting water.		acre-feet
Owner of land, but <u>lessee</u> is extracting/diverting water.	211	ubic-feet
Other: Please explain:	(Must be a specific number)	galllons
3. AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR		
4. AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR	Annual quantity	☐ acre-feet
5. METHOD OF MEASUREMENT Water Meter Power Meter D Non-metered or Estimated	Season of diversion	_ cubic-feet
6. TYPE OF WATER USE Agricultural 💢 Domestic or Municipal 🗆 Other:	Begin	gallons
7. ACTION REQUESTED (Check one):	End	
☐ Reopen file. (Fee required)	Maximum rate of diversion	
Close this file. (No fee required)		1
Record my water use. (Fee required)		
☐ Do not record my water use but keep my name on mailing list. (No fee required)		
Transfer this file to:		
	(LAST NAME)	
Company Name:		
Company Name:	3	
Address:(MAILING ADDRESS) (CITY) (STATE) (ZI	P CODE)
Address:(MAILING ADDRESS)	СЛΎ) (STATE) (ZI	P CODE)
Address:(MAILING ADDRESS) (Telephone: () Effective Date:(<u>· · · · · · · · · · · · · · · · · · · </u>
Address:(MAILING ADDRESS) (<u>· · · · · · · · · · · · · · · · · · · </u>
Address:	nd irrigation, new method of irrigation, etc.)	<u>· · · · · · · · · · · · · · · · · · · </u>
Address:(MAILING ADDRESS) (Telephone: () Effective Date:(nd irrigation, new method of irrigation, etc.)	<u>· · · · · · · · · · · · · · · · · · · </u>
Address:	nd irrigation, new method of irrigation, etc.)	<u>· · · · · · · · · · · · · · · · · · · </u>
Address:	nd irrigation, new method of irrigation, etc.)	<u>· · · · · · · · · · · · · · · · · · · </u>
Address:	nd irrigation, new method of irrigation, etc.) best of my knowledge.	<u>· · · · · · · · · · · · · · · · · · · </u>
Address:	best of my knowledge. (LAST NAME	<u>· · · · · · · · · · · · · · · · · · · </u>

PLEASE COMPLETE. SUBMIT THE ORIGINAL AND M A COPY FOR YOUR RECORDS State of California, State Water Resources Contro-Board, Division of Water Rights

P.O. BOX 2000, SACRAMENTO, CA 95812-2000 Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov

ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

(GROUNDWATER RECORDATION PROGRAM)

If the owner information below is wrong or missing, please correct. OWNER(S) OF RECORD L A COUNTY WATERWORKS DIST NO 35

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING:

L A COUNTY WATERWORKS DIST NO 35 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well WELL 2

State Well Number 06N/09W-04A01 S

RECORDATION NO: G193395 CONTACT PHONE NO: (626) 300-3395

> Parcel Number 3244-25-57

DEADLINE: Notices must be received no later than June 30, 2007 in order to be recorded.

REQUIRED FEES: A filing fee of \$115.00 Is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE If the above information is inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the coming year. 1. OWNERSHIP. Person listed below is: Owner of fand on which well or point of diversion is located, and is extracting/diverting water. · Lessee of land on which well or point of diversion is located, and is extracting/diverting water. മcre-feet ≱ □ cubic-feet Owner of land, but lessee is extracting/diverting water. (Must be a specific number) gallions Other: Please explain: ____ AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR 4. AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR Annual quantity □-acre-feet METHOD OF MEASUREMENT M Water Meter D Power Meter D Non-metered or Estimated Season of diversion ☐ cubic-feet **TYPE OF WATER USE** 6. ☐ Agricultural 🏋 Domestic or Municipal ☐ Other: Begin ☐ gallons ACTION REQUESTED (Check one): End Maximum rate of diversion ☐ Reopen file. (Fee required) ☐ Close this file (No fee required) Record my water use. (Fee required) Do not record my water use but keep my name on mailing list. (No fee required) Transfer this file to: (NEW OWNER'S FIRST NAME) (M. NAME) (LAST NAME)

Company, Mam	e				<u> </u>	<u> </u>	:
Address:	100	1 7		., ; :		1	
Telephone: ()	(MAILING ADDRESS)	Effective Date:		(CITY) .	(STATE)	(ZIP CODE)
		t to			•		
8. SUPPLEMENTAL	INFORMATION.	Please list any changes in you	ur project since last year	ínéw pump, nev	v land Irrigation, ne	w method of irrigation	elc.) or any other comme
	-			. , , , , ,			, oldy of dry drillor domain
9. CERTIFICATION	No cicuatura	1	. (1)			Property of the	
9. CENTIFICATION	AND SIGNATURE:	certify that the forgoing	statements are true a	nd correct to t	he best of my kn	owledge.	
Signature:	ann	Atak	M)	Date _	6/5	108	<u> </u>
Printed Name	DANT	AL /			l-	4,E4E8,	TY
	(FIRST NAMÉ)		(M. NAME)		(LAST	NAME	
Company Name:			THIS SPACE FO	OR OFFICE US	E ONLY R.	AMT:	

PLEASE COMPLETE. SUBMIT THE ORIGINAL AND MAKE A COPY FOR YOUR RECORDS State of California, State Water Resources Con. Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

(GROUNDWATER RECORDATION PROGRAM)

G193247

If the owner information below is wrong or missing, please correct. OWNER(S) OF RECORD LA COUNTY WATERWORKS DIST NO 38

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING:

LA COUNTY WATERWORKS DIST NO 38 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

9.

S P Owner's Designation of Well State Well Number 3 06N/09W-10Q01 S

RECORDATION NO: G193247 CONTACT PHONE NO: (626) 458-7157

Parcel Number

DEADLINE: Notices must be received no later than June 30, 2007 in order to be recorded.

REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

The state of the section of the sect	ard. Do not send cash,	
PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE B	FFORE COMPLETING THIS NOT	; :CE
in the 20010 information is macourate, please line it out in red and provide current information. Notify this off	ice if ownership or address changes or	CUT during the coming
year. 1. TYPE OF DIVERSION © Groundwater extraction or □ Surface diversion	. '	
2. OWNERSHIP. Person listed below is:		
Owner of land on which well or point of diversion is located, and is extracting/diverting water.	7 3	•
Lessee of land on which well or point of diversion is located, and is extracting/diverting water.	<u> </u>	
Owner of land, but lessee is extracting/diverling water.	479	Macre-feet
Other: Please explain:	(Must be a specific number)	□ cubic-feet
3. AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR	(tweeter a specific halfibel)	galllons
4. AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR		<u> </u>
5. METHOD OF MEASUREMENT Mater Meter Dewer Meter Non-metered or Estimated	Annual quantity	□ zore-feet
6. TYPE OF WATER USE ☐ Agricultural ☑ Domestic or Municipal ☐ Other:	Season of diversion	□ cubic-feet
7. ACTION REQUESTED (Check one):	− Begin <u></u> End	∘ □ gailons
☐ Reopen file. (Fee required):	Maximum rate of diversion	_
Close this file. (No fee required)		
Record my water use. (Fee required)		
☐ Do not record my water use but keep my name on mailing list. (No fee required)		
Transfer this file to:		
Company Name: (NEW OWNER'S FIRST NAME) (M. NAME)	(LAST NAME)	·
Address:		· · · · · · · · · · · · · · · · · · ·
Telephone: () (MAILING ADDRESS) Effective Date:	(CITY) (STATE) (ZIP CODE)
Lincolive Date.	<u> </u>	
8. SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new		
new pump, new	land imgation, new method of imgation, etc.) or any other comment
		
9. CERTIFICATION AND SIGNATURE: Icertify that the forgoing statements are true and correct to the	e best of my knowledge.	
Signature: Date Date	6/5/08	÷
Printed Name DA NICE	LEERT	
(FIRST NAME) (M. NAME)	(LAST NAME	
Company Name:THIS SPACE FOR OFFICE USE	,	·
	ONLY RAMT:	

****PLEASE COMPLETE. SUBMIT THE ORIGINAL ANT KE A COPY FOR YOUR RECORDS***
State of California, State Water Resources Communi Board, Division of Water Rights
P.O. BOX 2000, SACRAMENTO, CA 95812-2000
Info: (916) 341-5300, FAX: (916) 341-5400, Web: https://www.waterrights.ca.gov

ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the Owner information below is wrong or missing, please correct. PRIMARY OWNER OF RECORD COUNTY OF LOS ANGELES

G192722

2006

RECORDATION NO:G192722 CONTACT PHONE NO:(626) 458-7157

PRIMARY CONTACT OR AGENT FOR HAIL & REPORTING COUNTY OF LOS ANGELES 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well WM J FOX AIRFIELD WELL NO 1

State Well Number 08N/13W-35N S

Parcel Number

DEADLINE: Notices must be received no later than June 30, 2007 In order to be recorded.

REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

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If the above Information is Inaccurate, please line it out in red and provide current Information. Notify this office if ownership or address changes occur during the coming year.

1. TYPE OF DIVERSION Groundwater extraction or Surface diversion

2. OW	PE OF DIVERSION Groundwater extraction or Surface diversion NERSHIP. Person listed below is: Owner of land on which well or point of diversion is located, and is extracting/diverting water.		
(1) (2) (3) AM(Lessee of land on which well or point of diversion is located, and is extracting/diverting water. Owner of land, but lessee is extracting/diverting water. Other: Please explain: COUNTY INSTITUTION DUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR	(Must be a specific number	Xacre-feet □cubic-feet □gallons
4. AMC 5. MET 6. TYP	DUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR ————— "HOD OF MEASUREMENT Water Meter Power Meter Non-metered or Estimated E OF WATER USE Agricultural Domestic or Municipal Other		☐ acre-feet
	ION REQUESTED (Check one): Reopen file. (Fee required) Close this file. (No fee required)	Annual quantity	gallons
	Record my water use. (Fee required) Do not record my water use but keep my name on malling list. (No fee required)	End Maximum rate of diversion	
Transfer	this file to: (NEW OWNER'S FIRST NAME) (M. NAME)		
	(NEW OWNER'S FIRST NAME) (M. NAME)	(LAST NAME)	
	Address:	·	
		CITY) (STATE)	(ZIP CODE)
8. SUP	PLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new lar	nd irrigation, new method of Irrigat	ion, etc.) or any other comme
9. CER	IFICATION AND SIGNATURE: I certify that the forgoing statements are true and correct to the		
Signature	Date_	6-26-07	
Printed Na	me DIANE Low	ERY-BINNIE	
Company	(FIRST NAME) (M. NAME)	(LAST NAME	
THIS SPAC	E FOR OFFICE USE ONLY	В	1107

"PLEASE COMPLETE. SUBMIT THE ORIGINAL AND E A COPY FOR YOUR RECORDS*** State of California, State Water Resources Con. . . Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000 Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov

ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct. PRIMARY OWNER OF RECORD. L A COUNTY WATERWORKS DIST NO 4 G192543

RECORDATION NO: G192543 CONTACT PHONE NO:(626) 458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING L A COUNTY WATERWORKS DIST NO 4 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well NO 6 INSTALLED 1947

State Well Number 07N/12W-22B S

Parcel Number

DEADLINE: Notices must be received no later than June 30, 2007 in order to be recorded. REQUIRED FEES: A filling fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your

recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash. PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE If the above information is inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the coming year. 1. TYPE OF DIVERSION X Groundwater extraction or Disurface diversion 2. OWNERSHIP. Person listed below is: Owner of land on which well or point of diversion is located, and is extracting/diverting water. Lessee of land on which well or point of diversion is located, and is extracting/diverting water. acre-lest Owner of land, but lessee is extracting/diverting water. i62 □ cubic-leet Other: Please explain: (Must be a specific number) □gallons AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR METHOD OF MEASUREMENT Water Meter | Power Meter 5. 🗆 acre-feet ■ Non-metered or Estimated TYPE OF WATER USE □ cubic-feet ACTION REQUESTED (Check one): Annual quantity ☐ gallons Reopen file. (Fee required) Season of diversion Close this file. (No fae required) Begin_ Record my water use. (Fee required) Fnd X Maximum rate of diversion Do not record my water use but keep my name on mailing list. (No fee required) Transfer this file to: (NEW OWNER'S FIRST NAME) (M, NAME) (LAST NAME) Company Name: Address: (STATE) (ZIP CODE) Telephone: () Effective Date: SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new land irrigation, new method of irrigation, etc.) or any other comments. CERTIFICATION-AND SIGNATURE: I certify that the forgoing statements are true and correct to the best of my knowledge. Signature: Printed Name LONERY-BINNIE (FIRST NAME) (M. NAME) ANGELES COUNT Company Name: THIS SPACE FOR OFFICE USE ONLY AMT;

State of California, State Water Resources Communication of Water Rights ***PLEASE COMPLETE. SUBMIT THE ORIGINAL AND P.O. BOX 2000, SACRAMENTO, CA 95812-2000

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct.

PRIMARY OWNER OF RECORD L A COUNTY WATERWORKS DIST NO 4

G192729

2006

RECORDATION NO:G192729 CONTACT PHONE NO:(826) 458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING L A COUNTY WATERWORKS DIST NO 4 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well NO 15

State Well Number 07NV12W-11M S

Parcel Number

DEADLINE: Notices must be received no later than June 30, 2007 in order to be recorded. REQUIRED FEES: A filling fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEF If the above information is inaccurate, please line it out in red and provide current information. Notify this office year.	ORE COMPLETING THIS NO if ownership or address changes)TICE occur during the coming
1. TYPE OF DIVERSION of Groundwater extraction or Surface diversion		
2. OWNERSHIP. Person listed below is:		
Money of land on which well or point of diversion is located, and is extracting/diverting water.		
Lessee of land on which well or point of diversion is located, and is extracting/diverting water.		
Owner of land, but lessee is extracting/diverting water.	157	` ™ acre-feet
Other: Please explain:		cubic-feet
3. AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR	(Must be a specific number)	gallons
4. AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR		
5. METHOD OF MEASUREMENT Water Meter Power Meter Non-metered or Estimated		☐ acre-feet
6. TYPE OF WATER USE Agricultural 🔀 Domestic or Municipal 🗆 Other:		□ cubic-feet
7. ACTION REQUESTED (Check one):	Annual quantity	_ ,
☐ Reopen file. (Fee required)	Season of diversion	☐ Aurous
☐ Close this file. (No fee required)	Begin	
Record my water use. (Fee required)	End Maximum rate of diversion	
☐ Do not record my water use but keep my name on mailing list. (No fee required)	waxinum rate of diversion	
Transfer this file to:		
(NEW OWNER'S FIRST NAME) (M. NAME) Company Name:	(LAST NAME)	
Address:		
(MAILING ADDRESS)	CITY) (STATE)	(ZIP CODE)
Telephone: () Effective Date:		<u> </u>
8. SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new la	nd irrigation, new method of irrigation,	, etc.) or any other comments
9. CERTIFICATION AND SIGNATURE: I certify that the forgoing statements are true and correct to the	best of my knowledge.	
Signature:DateDate	6-26-07	
Printed Name DIANE	LOWERY - BINA	JIE-
(FIRST NAME) (M. NAME)	(LAST NAME	
Company Name: LOS ANGIEUES COUNTY		
THIS SPACE FOR OFFICE USE ONLY	R. A	AMT:
		3191 +

PLEASE COMPLETE. SUBMIT THE ORIGINAL AND E A COPY FOR YOUR RECORDS
State of California, State Water Resources Communication of Water Rights
P.O. BOX 2000, SACRAMENTO, CA 95812-2000

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

if the owner information below is wrong or missing, please correct.

PRIMARY OWNER OF RECORD L A COUNTY WATERWORKS DIST NO 4

G192942

2006

RECORDATION NO:G192942 CONTACT PHONE NO:(625) 458-7157

Ħ.

AMT:

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING L A COUNTY WATERWORKS DIST NO 4 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well WELL NO 22

THIS SPACE FOR OFFICE USE ONLY

State Well Number 07N/13W-24M S

Parcel Number

DEADLINE: Notices must be received no later than June 30, 2007 in order to be recorded. REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash. PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE If the above information is inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the coming 1. TYPE OF DIVERSION Corondwater extraction or Surface diversion 2. OWNERSHIP. Person listed below is: Owner of land on which well or point of diversion is located, and is extracting/diverting water. Lessee of land on which well or point of diversion is located, and is extracting/diverting water. XI.acre-feet Owner of land, but lessee is extracting/diverting water. □ cubic-feet Other: Please explain: (Must be a specific number) **□**gallons AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR METHOD OF MEASUREMENT Water Meter Power Meter □ acre-feet TYPE OF WATER USE 🗖 Agricultural 💹 Domestic or Municipal 🔲 Other: _ □ cubic-feet ACTION REQUESTED (Check one): Annual quantity ☐ gallons Reopen file. (Fee required) Season of diversion Close this file. (No fee required) Begin_ х Record my water use. (Fee required) End Maximum rate of diversion Do not record my water use but keep my name on mailing list. (No fee required) Transfer this file to: (NEW OWNER'S FIRST NAME) (M. NAME) (LAST NAME) Company Name: Address: (MAILING ADDRESS) (STATE) (ZIP CODE) Telephone: ()_ Effective Date: SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new land irrigation, new method of irrigation, etc.) or any other comments. CERTIFICATION AND SIGNATURE: I certify that the forgoing statements are true and correct to the best of my knowledge. Signature: LOWERY-BINNIE Printed Name (FIRST NAME) (M. NAME) LOS ANGELES CHATY Company Name:

PLEASE COMPLETE. SUBMIT THE ORIGINAL AND E A COPY FOR YOUR RECORDS
State of California, State Water Resources Communi Board, Division of Water Rights
P.O. BOX 2000, SACRAMENTO, CA 95812-2000
Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov

ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct.
PRIMARY OWNER OF RECORD L A COUNTY WATERWORKS DIST NO 4

G192945

2006

RECORDATION NO:G192945 CONTACT PHONE NO:(626) 458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING L A COUNTY WATERWORKS DIST NO 4 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well WELL NO 25

THIS SPACE FOR OFFICE USE ONLY

State Well Number 07NV12W-21C S

Parcel Number

AMT:

DEADLINE: Notices must be received no later than June 30, 2007 in order to be recorded.

REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should Indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

If the above Information is inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the coming year.

1. TYPE OF DIVERSION Groundwater extraction or Surface diversion

2. OWNERSHIP. Person listed below is: Owner of land on which well or point of diversion is located, and is extracting/diverting water. Lessee of land on which well or point of diversion is located, and is extracting/diverting water. Owner of land, but lessee is extracting/diverting water. Owner of land on which well or point of diversion is located, and is extracting/diverting water. Owner of land on which well or point of diversion is located, and is extracting/diverting water. Owner of land on which well or point of diversion is located, and is extracting/diverting water. Owner of land, but lessee is extra	1. TY	PE OF DIVERSION 154 Groundwater extraction or Surface diversion		
Lessee_ol land on which well or point of diversion is located, and is extracting/diverting water. Owner ol land, but lessee_is extracting/diverting water. Other: Please explain: 3. AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR METHOD OF MEASUREMENT Water Meter Power Meter Non-metered or Estimated Oxide-feet Oxi				,
Lessee_ol land on which well or point of diversion is located, and is extracting/diverting water. Owner ol land, but lessee_is extracting/diverting water. Other: Please explain: 3. AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR METHOD OF MEASUREMENT Water Meter Power Meter Non-metered or Estimated Oxide-feet Oxi	⊠.	Owner of land on which well or point of diversion is located, and is extracting/diverting water.		
Owner of land, but lessee is extracting/diverting water. Other: Please explain: AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR (Must be a specific number) gallons gallo		Lessee of land on which well or point of diversion is located, and is extracting/diverting water.		
Other: Please explain: Igadions Igadio		Owner of land, but lessee is extracting/diverting water.	-430	-
AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR 4. AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR 5. METHOD OF MEASUREMENT Water Meter Power Meter Non-metered or Estimated acre-feet cubic-feet 6. TYPE OF WATER USE Agricultural Charter Other: cubic-feet 7. ACTION REQUESTED (Check one): Reopen file, (Fee required) Record my water use. (Fee required) 8. Record my water use. (Fee required) Do not record my water use but keep my name on mailing list. (No fee required) 1. Company Name: (NEW OWNER'S FIRST NAME) (M. NAME) (LAST NAME) 7. Address: (MAILING ADDRESS) (CITY) (STATE) (ZIP CODE) 8. SUPPLEMENTAL INFORMATION. Please list any charges in your project since last year (new pump, new land irrigation, new method of irrigation, etc.) or any other community 9. CERTIFICATION AND SIGNATURE: I certify that the forgoing statements are true and correct to the best of my knowledge. 1. CERTIFICATION AND SIGNATURE: I certify that the forgoing statements are true and correct to the best of my knowledge. 1. CIRCULTURE CAST NAME (LAST NAME CAST NAME		Other: Please explain:		
METHOD OF MEASUREMENT Water Meter Power Meter Non-metered or Estimated acro-feet coubic-feet coubic-	3. AM	OUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR	(Must be a specific number)	□galons
Control Cont	4. AM	IOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR	·	
Control Cont	5. ME	THOD OF MEASUREMENT Water Meter Power Meter Non-metered or Estimated		□ acre-feet
Annual quantity gallons Recopen file. (Fee required) Season of diversion Begin Record my water use. (Fee required) End Do not record my water use but keep my name on mailing list. (No ise required) Company Name: (NEW OWNER'S FIRST NAME) (M. NAME) (LAST NAME) Company Name: (NAILING ADDRESS) (CITY) (STATE) (ZIP CODE) Telephone: ()	6. TY	PE OF WATER USE Agricultural Monnestic or Municipal Other.		⊟ cubic-feet
Recopen file. (Fee required) Season of diversion Begin End Maximum rate of diversion Begin Maximum rate of diversion Begin Maximum rate of diversion M	7. AC	TION REQUESTED (Check one):	Annual quantity	
Close this file. (No fee required) Record my water use. (Fee required) Do not record my water use but keep my name on malling list. (No fee required) Transfer this file to: (NEW OWNER'S FIRST NAME) (COMPANY NAME) (CITY) (STATE) (ZIP CODE) Telephone: () SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new land irrigation, new method of imigation, etc.) or any other communication. CERTIFICATION AND SIGNATURE: I certify that the forgoing statements are true and correct to the best of my knowledge. LOWELL - SINNE (FIRST NAME) (M. NAME) (LAST NAME)		Reopen file, (Fee required)		
Record my water use. (Fee required) Do not record my water use but keep my name on malling list. (No fee required) Transfer this file to: (NEW OWNER'S FIRST NAME) (MAILING ADDRESS) Telephone: () (MAILING ADDRESS) Telephone: () (MAILING ADDRESS) Telephone: () (CITY) (STATE) (ZIP CODE) Effective Date: CERTIFICATION AND SIGNATURE: I certify that the forgoing statements are true and correct to the best of my knowledge. LOWELL BLANKE (FIRST NAME) (M. NAME) (M. NAME) (LAST NAME		Close this file. (No fee required)	Begin	
Transfer this file to: (NEW OWNER'S FIRST NAME) (M. NAME) (LAST NAME) (Company Name: (MAILING ADDRESS) Telephone; (MAILING ADDRESS) (CITY) (STATE) (ZIP CODE) Effective Date: (STATE) (ZIP CODE) Effective Date: (CITY) (STATE) (ZIP CODE) CERTIFICATION AND SIGNATURE: I certify that the forgoing statements are true and correct to the best of my knowledge. (FIRST NAME) (M. NAME) (M. NAME) (LAST NAME)	区	Record my water use. (Fee required)	End	
Company Name: Company Name: (NEW OWNER'S FIRST NAME) (M. NAME) (LAST NAME)		Do not record my water use but keep my name on mailing list. (No fee required)	Maximum rate of diversion	
SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new land irrigation, new method of Imigation, etc.) or any other common control of the best of the best of my knowledge. Signature: Date DIANE (FIRST NAME) (M. NAME) (M. NAME) LOWERY — BINNE	Transfe	(NEW OWNER'S FIRST NAME) (M. NAME) Company Name:	(LAST NAME)	
SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new land irrigation, new method of Imigation, etc.) or any other common control of the best of the best of my knowledge. Signature: Date DIANE (FIRST NAME) (M. NAME) (M. NAME) LOWERY — BINNE		(MAILING ADDRESS)	NITVI /OTATES	(ZID ČODE)
SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new land irrigation, new method of Irrigation, etc.) or any other common control of the best of my knowledge. CERTIFICATION AND SIGNATURE: I certify that the forgoing statements are true and correct to the best of my knowledge. Intel Name DIANE (M. NAME) (M. NAME) (LAST NAME		Telephone; () Effective Date:	oitt) (SIMIE)	(ZIP CODE)
ompany name: LOS AN STOCKS COUNTY	9. CEF Signatur Printed I	RTIFICATION AND SIGNATURE: I certify that the forgoing statements are true and correct to the Date (FIRST NAME) (M. NAME)	best of my knowledge. &-26-07 OWERY - BINNE	
	Compan	y Name: LOS AN STEUES COUNTY		

PLEASE COMPLETE. SUBMIT THE ORIGINAL AND E A COPY FOR YOUR RECORDS
State of California, State Water Resources Cormul Board, Division of Water Rights
P.O. BOX SACRAMENTO, CA 95812-2000

Info: (916) 341-5306, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov
ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct, PRIMARY OWNER OF RECORD L A COUNTY WATERWORKS DIST NO 4

G193045

2006

RECORDATION NO:G193045 CONTACT PHONE NO:(626) 458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING L A COUNTY WATERWORKS DIST NO 4 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91893-1331

Owner's Designation of Well NO 26

State Well Number 07N/12W-15R S Parcel Number

DEADLINE: Notices must be received no later than June 30, 2007 in order to be recorded. REQUIRED FEES: A filling fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash. PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE if the above information is inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the coming year. OWNERSHIP. Person listed below is: M Owner of land on which well or point of diversion is located, and is extracting/diverting water. Lessee of land on which well or point of diversion is located, and is extracting/diverting water. acre-feet
 acre-feet Owner of land, but lessee is extracting/diverting water, 24 □ cubic-feet Other: Please explain: (Must be a specific number) □gallons AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR METHOD OF MEASUREMENT 💢 Water Meter 🖂 Power Meter ☐ acre-feet ☐ Non-metered or Estimated 6. TYPE OF WATER USE Agricultural 💆 Domestic or Municipal 🔲 Other: □cubic-feet ACTION REQUESTED (Check one): Annual quantity, □ gallons Reopen file. (Fee required) Season of diversion Close this file. (No fee regulred) Begin 凶 Record my water use. (Fee required) End Maximum rate of diversion П Do not record my water use but keep my name on mailing list. (No fee required) Transfer this file to: ____ (NEW OWNER'S FIRST NAME) (M. NAME) (LAST NAME) Company Name: _ Address: (MAILING ADDRESS) (CITY) (STATE) (ZIP CODE) Telephone: () Effective Date: SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new land irrigation, new method of irrigation, etc.) or any other comments. CERTIFICATION AND SIGNATURE: I certify that the forgoing statements are true and correct to the best of my knowledge. Signature: DIANE OWERY-BINNIE Printed Name (FIRST NAME) (M. NAME) (LAST NAME LOS ANGELES COUNTY Company Name: THIS SPACE FOR OFFICE USE ONLY

PLEASE COMPLETE. SUBMIT THE ORIGINAL AND **E A COPY FOR YOUR RECORDS** State of California, State Water Resources Consul Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000 Info: (916) 341-5300, FAX: (916) 341-5400, Web: htpp://www.waterrights.ca.gov

ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

G193046

2006

If the owner information below is wrong or missing, please correct. PRIMARY OWNER OF RECORD L A COUNTY WATERWORKS DIST NO 4

> RECORDATION NO: G193046 CONTACT PHONE NO:(626) 458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING L A COUNTY WATERWORKS DIST NO 4 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well

NO 27

State Well Number 07NV12W-24M \$

Parcel Number

DEADLINE: Notices must be received no later than June 30, 2007 in order to be recorded.

REQUIRED FEES: A filling fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash. PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE If the above information is inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the coming year. 1. TYPE OF DIVERSION 🔀 Groundwater extraction or 🖂 Surface diversion OWNERSHIP. Person listed below is: Owner of land on which well or point of diversion is located, and is extracting/diverting water. Lessee of land on which well or point of diversion is located, and is extracting/diverting water, Acre-feet Owner of land, but lessee is extracting/diverting water. ୫୫ □ cubic-feet Other: Please explain: (Must be a specific number) **□**galions AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR METHOD OF MEASUREMENT Water Meter Power Meter □ acre-feet Non-metered or Estimated TYPE OF WATER USE ☐ Agricultural 💋 Domestic or Municipal 🗇 Other: _ □ cubic-teat ACTION REQUESTED (Check one): Annual quantity, 🔯 galions Reopen file. (Fee required) Season of diversion Close this file. (No fee required) Begin . End Record my water use. (Fee required) Maximum rate of diversion Do not record my water use but keep my name on mailing list. (No fee required) Transfer this file to: (NEW OWNER'S FIRST NAME) (M. NAME) (LAST NAME) Company Name: Address:

Telephone: ()	(MAILING ADDRESS	Effective Date:	(CITY)	(STATE)	(ZIP CODE)
B. SUPPLEMENTAL INFORM	IATION. Please fist any changes in	your project since last year (ne	w pump, new land imigation, ne	ew method of imigalic	on, etc.) or any other comment
9. CERTIFICATION AND SIG	NATURE: I certify that the forgo	ing statements are true and	сопесt to the best of my kr		
	JE ST NAME)	(M. NAME)	Lav (Las	JERY- BIJ	NNE
Company Name: LOS	ANGELES COUNT	ry .	· · · · · · · · · · · · · · · · · · ·		
THIS SPACE FOR OFFICE USE ORL	<u> </u>			R	_AMT:

***PLEASE COMPLETE. SUBMIT THE ORIGINAL AND
State of California, State Water Resources Communication of Water Rights
P.O. BOX 2000, SACRAMENTO, CA 95812-2000
Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov

ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

G193048

2006

if the owner information below is wrong or missing, please correct.

If the owner information below is wrong or missing, please correct.

PRIMARY OWNER OF RECORD L A COUNTY WATERWORKS DIST NO 4

RECORDATION NO:G193048 CONTACT PHONE NO:(626) 458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING
L. A COUNTY WATERWORKS DIST NO 4
900 S FREMONT AVE 9TH FL.
ALHAMBRA. CA 91803-1331

Owner's Designation of Well NO 29

THIS SPACE FOR OFFICE USE ONLY

State Well Number 07N/12W-34N S Parcel Number

AMT:

DEADLINE: Notices must be received no later than June 30, 2007 in order to be recorded.

REQUIRED FEES: A filling fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash. PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE If the above information is inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the coming 1. TYPE OF DIVERSION of Groundwater extraction or Surface diversion 2. OWNERSHIP. Person listed below is: Owner of land on which well or point of diversion is located, and is extracting/diverting water. M Lessee of land on which well or point of diversion is located, and is extracting/diverting water. ₩ acre-feet Owner of land, but lessee is extracting/diverting water. □ cubic-feet Other, Please explain: (Must be a specific number) **□**gallons AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR 5. METHOD OF MEASUREMENT 🔀 Water Meter 🔲 Power Meter □ acre-feet ■ Non-metered or Estimated 6. TYPE OF WATER USE ☐ Agricultural X Domestic or Municipal ☐ Other: __ □ cubic-feet ACTION REQUESTED (Check one); Annual quantity gallons 🗆 Reopen file. (Fee required) Season of diversion Close this file. (No fee required) Begin_ End, Record my water use. (Fee required) Maximum rate of diversion Do not record my water use but keep my name on mailing list. (No fee required) Transfer this file to: ___ (NEW OWNER'S FIRST NAME) (M. NAME) (LAST NAME) Company Name: Address: (CITY) (STATE) (ZIP CODE) Telephone: () Effective Date: SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new land irrigation, new method of irrigation, etc.) or any other comments. CERTIFICATION AND SIGNATURE: I certify that the forgoing statements are true and correct to the best of my knowledge. 6-25-07 Signature: LOWERY-BINNIE (LAST NAME Printed Name (M. NAME) ANGELIES COUNT Company Name:

PLEASE COMPLETE. SUBMIT THE ORIGINAL AND (E A COPY FOR YOUR RECORDS
State of California, State Water Resources Con... of Board, Division of Water Rights
P.O. BOX 2000, SACRAMENTO, CA 95812-2000
Info: (916) 341-5300, FAX: (916) 341-5400. Web: https://www.waterrichis.ca.gov

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov
ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct.

PRIMARY OWNER OF RECORD L A COUNTY WATERWORKS DIST NO 4

G193105

2006

RECORDATION NO:G193105 CONTACT PHONE NO:(626) 458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING L A COUNTY WATERWORKS DIST NO 4 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well NO 30 State Well Number 07N/12W-34 S

Parcel Number

DEADLINE: Notices must be received no later than June 39, 2007 in order to be recorded.

REQUIRED FEES: A filling fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

If the above information is inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the coming

If the abo year.	ove information is inaccurate,	, please line it out in red and provide current in	formation. Notify this offi	ce if ownership or address change	s occur during the coming
1. TY	PE OF DIVERSION 💥 G	roundwater extraction or 🔲 Surface dive	rsion		
	VNERSHIP. Person liste				
×	Owner of land on which we	ell or point of diversion is tocated, and is extra	cting/diverting water.		
	<u>Lessee</u> of land on which w <u>Owner</u> of land, but <u>lessee</u> i	ell or point of diversion is located, and is extra is extracting/diverting water.	cting/diverting water.	348	acre-feet
_ 🛚	Other. Please explain:			(Must be a specific number)	
		TER EXTRACTED DURING CALENDAR		(mass as a openio harricol)	Цушин
4. AN	OUNT OF SURFACE WA	TER DIVERTED DURING CALENDAR	YEAR ——→		
5. ME	THOD OF MEASUREME		Non-metered or Estimal	ted	🖺 acre-feet
	PE OF WATER USE	Agricultural 🔀 Domestic or Municipal [☐ Olher:		☐ cubic-feet
7. AC	TION REQUESTED (Che			Annual quantity	gallons
	Reopen file. (Fee required)			Season of diversion	-,
Ö	Close this file. (No fee requ			Begin End	
嫍	Record my water use. (Fe			End Maximum rate of diversion	
	Do not record my water use	e but keep my name on mailing list. (No fee n	equired)	INDAMICAL PAGE OF GIVERALOR	
runore		(NEW OWNER'S FIRST NAME) (MAILING ADDRESS)	(M. NAME)	(LAST NAME)	
	Addiess,	(MAILING ADDRESS)		(CITY) (STATE)	(ZIP CODE)
	Telephone: ()	Effective Da	te:	(SIAIE)	(ar cour)
9. CEI Signatui		•	s are true and correct to t	ne best of my knowledge.	
i annow t	(FIRST		NAME)	LOWERY - BINI (LAST NAME	NIE
				Investment	
Compan	y Name: LOS AN	sheles county		levor trains	· · · · · · · · · · · · · · · · · · ·

PLEASE COMPLETE. SUBMIT THE ORIGINAL AND 'E A COPY FOR YOUR RECORDS State of California, State Water Resources Cot..... Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct. PRIMARY OWNER OF RECORD LA COUNTY WATERWORKS DIST NO 4 G193108

2006

RECORDATION NO: G193108 CONTACT PHONE NO:(626) 458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING L A COUNTY WATERWORKS DIST NO 4 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Dasignation of Well NO 33

State Well Number 07N/12W-27 S

Parcel Number

DEADLINE: Notices must be received no later than June 30, 2007 in order to be recorded.

REQUIRED FEES: A filling fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash,

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE If the above information is inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the coming year. 1. TYPE OF DIVERSION Signal Groundwater extraction or Surface diversion OWNERSHIP. Person listed below is: Owner of land on which well or point of diversion is located, and is extracting/diverting water. × Lessee of land on which well or point of diversion is located, and is extracting/diverting water. acre-feet Owner of land, but lessee is extracting/diverting water. 250 Ci cubic-feet Other: Please explain: (Must be a specific number) **⊟**gallons AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR METHOD OF MEASUREMENT 🔁 Water Meter 🗆 Power Meter ☐ acre-feet ■ Non-metered or Estimated TYPE OF WATER USE 🗖 Agricultural 🕱 Domestic or Municipal 🔲 Other: _ □cubic-feet ACTION REQUESTED (Check one): Annual quantity_ 🔲 gallons Reopen file. (Fee required) Season of diversion Close this file. (No fee regulred) Begin_ End. Ą Record my water use. (Fee required) Maximum rate of diversion Do not record my water use but keep my name on mailing list. (No fee required) Transfer this file to: (NEW OWNER'S FIRST NAME) (M. NAME) (LAST NAME) Company Name: Address: (MAILING ADDRESS) (CITY) (STATE) (ZIP CODE) Telephone: () Effective Date: SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new land irrigation, new method of irrigation, etc.) or any other comments. CERTIFICATION AND SIGNATURE: I certify that the forgoing statements are true and correct to the best of my knowledge. Signature: **Printed Name** (FIRST NAME) (M. NAME) LOS ANGELES COUNTY Company Name: THIS SPACE FOR OFFICE USE ONLY AMT:

PLEASE COMPLETE. SUBMIT THE ORIGINAL AND. GE A COPY FOR YOUR RECORDS State of California, State Water Resources Con. or Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000 Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov

ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct. PRIMARY OWNER OF RECORD L A COUNTY WATERWORKS DIST NO 4 G193160

2006

RECORDATION NO:G193160 CONTACT PHONE NO:(626) 458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING L A COUNTY WATERWORKS DIST NO 4 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well NO 38

State Well Number 07N/12W-09M S

Parcel Number

AMT:

DEADLINE: Notices must be received no later than June 30, 2007 in order to be recorded. REQUIRED FEES: A filling fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE If the above information is inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the coming year. 1. TYPE OF DIVERSION & Groundwater extraction or

Surface diversion 2. OWNERSHIP. Person listed below is: Owner of land on which well or point of diversion is located, and is extracting/diverting water. Lessee of land on which well or point of diversion is located, and is extracting/diverting water. acre-feet Owner of land, but lessee is extracting/diverting water. □ cubic-feet Other: Please explain: (Must be a specific number) □gallons AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR □ acre-feet ☐ Non-metered or Estimated TYPE OF WATER USE Agricultural Domestic or Municipal Domestic or Municipal □ cubic-feet ACTION REQUESTED (Check one): Annual quantity gallons 🗌 Reopen file. (Fee required) Season of diversion Close this file. (No fee regulred) Begin_ End. Record my water use. (Fee required) Maximum rate of diversion Do not record my water use but keep my name on mailing list. (No fee required) Transfer this file to: (NEW OWNER'S FIRST NAME) · (M. NAME) (LAST NAME) Company Name: Address: (MAILING ADDRESS) (CITY) (STATE) (ZIP CODE) Effective Date: SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new land irrigation, new method of irrigation, etc.) or any other comments. CERTIFICATION AND SIGNATURE: I certify that the forgoing statements are true and correct to the best of my knowledge. Date 6-26-07 LOWERY-BINNIE (LAST NAME **Printed Name** (M. NAME) LIGELES COUNTY Company Name: THIS SPACE FOR OFFICE USE ONLY

ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct.

PRIMARY OWNER OF RECORD L A COUNTY WATERWORKS DIST NO 4

G193161

2006

RECORDATION NO:G193161 CONTACT PHONE NO:(626) 458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING L A COUNTY WATERWORKS DIST NO 4 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well NO 37 State Well Number 07N/12W-30B S

Parcel Number

DEADLINE: Notices must be received no later than June 30, 2007 in order to be recorded.

REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash. PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE If the above information is inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the coming year. TYPE OF DIVERSION X Groundwater extraction or Surface diversion OWNERSHIP. Person listed below is: Owner of land on which well or point of diversion is located, and is extracting/diverting water. Lessee of land on which well or point of diversion is located, and is extracting/diverting water. acre-feet Owner of land, but lessee is extracting/diverting water. □ cubic-feet Other: Please explain: (Must be a specific number) AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR METHOD OF MEASUREMENT (X) Water Melar [] Power Melar □ acre-feet Non-metered or Estimated 6. TYPE OF WATER USE ☐ Agricultural 💆 Domestic or Municipal 🥅 Other: _ □ cubic-feet ACTION REQUESTED (Check one): Annual quantity ☐ gallons Reopen file. (Fee required) Season of diversion Close this file. (No fee regulred) Begin_ End Record my water use. (Fee required) Maximum rate of diversion Do not record my water use but keep my name on mailing list. (No fee required) Transfer this file to: (NEW OWNER'S FIRST NAME) (M. NAME) (LAST NAME)

Company Name:				
Address:				
Telephone: ()	(MAILING ADDRESS) Effective Date:	(CITY)	(STATE)	(ZIP CODE)
B. SUPPLEMENTAL INFORMA	ATION. Please list any changes in your project since last year	new pump, new land imgalion, n	ew method of irrigatio	n, etc.) or any other comme
	IATURE: I certify that the forgoing statements are true a			· <u> </u>
Signature:	my- Du	Date	-07	
Printed Name DIA	NE	LOWERY	- BINNIE	•
-	NAME) (M. NAME) ANGELES COUNTY	. (LAS	T NAME	
THIS SPACE FOR DEFICE USE ONLY			В	Aller

PLEASE COMPLETE. SUBMIT THE ORIGINAL ANT KE A COPY FOR YOUR RECORDS
State of California, State Water Resources Cor... Ji Bozard, Division of Water Rights
P.O. BOX 2000, SACRAMENTO, CA 95812-2000
Info: (916) 341-5300

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov
ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct.

PRIMARY OWNER OF RECORD L A COUNTY WATERWORKS DIST NO 4

G193162

2006

RECORDATION NO:G193162 CONTACT PHONE NO:(626) 458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING L A COUNTY WATERWORKS DIST NO 4 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well NO 38

Company Name:

THIS SPACE FOR OFFICE USE ONLY

NLEVES

State Well Number 07N/12W-21F S Parcel Number

DEADLINE: Notices must be received no later than June 30, 2007 in order to be recorded. REQUIRED FEES: A filling fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash. PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE If the above information is inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the coming 1. TYPE OF DIVERSION or Surface diversion or Surface diversion 2. OWNERSHIP. Person listed below is: Owner of land on which well or point of diversion is located, and is extracting/diverting water. Lessee of land on which well or point of diversion is located, and is extracting/diverting water. acre-feet Owner of land, but lessee is extracting/diverting water. □cubic-feet Other: Please explain; AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR □ gallons AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR METHOD OF MEASUREMENT | Water Meler | Power Meler acre-feet ■ Non-metered or Estimated TYPE OF WATER USE 6. ☐ Agricultural ☑ Domestic or Municipal ☐ Other: _ □ cubic-feet **ACTION REQUESTED (Check one):** Annual quantity ☐ gallons Reopen file. (Fee required) Season of diversion Close this file. (No fee regulred) Begin , X Record my water use. (Fee required) Fad Maximum rate of diversion Do not record my water use but keep my name on mailing list. (No fee required) Transfer this file to: (NEW OWNER'S FIRST NAME) (M. NAME) (LAST NAME) Company Name: Address: (MAILING ADDRESS) (STATE) (ZIP CODE) Telephone: ()_ Effective Date: SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new land intigation, new method of intigation, etc.) or any other comments. CERTIFICATION AND SIGNATURE: I certify that the forgoing statements are true and correct to the best of my knowledge. Signature: 6-28-07 Printed Name (M. NAME)

PLEASE COMPLETE. SUBMIT THE ORIGINAL AND - KE A COPY FOR YOUR RECORDS State of California, State Water Resources Con. _ . Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct.

G193201

PRIMARY OWNER OF RECORD L. A COUNTY WATERWORKS DIST NO 4

RECORDATION NO: G193201 CONTACT PHONE NO:(626) 458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING L A COUNTY WATERWORKS DIST NO 4 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well

State Well Number

Parcel Number

WELL NO 41 07N/10W-19E01 S DEADLINE: Notices must be received no later than June 30, 2007 in order to be recorded. REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash. PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE If the above information is inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the coming year. 1. TYPE OF DIVERSION ★ Groundwater extraction or □ Surface diversion OWNERSHIP. Person listed below is: Owner of land on which well or point of diversion is located, and is extracting/diverting water. Lessee of land on which well or point of diversion is located, and is extracting/diverting water. acre-feet Owner of land, but lessee is extracting/diverting water. Cubic-feet Other: Please explain: (Must be a specific number) □ gallons AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR ■ Non-metered or Estimated ☐ acre-feet 6. TYPE OF WATER USE □ cublc-feet 7. ACTION REQUESTED (Check one): Annual quantity gallons Reopen file, (Fee required) Season of diversion Close this file. (No fee required) Begin_ End Record my water use. (Fee required) Maximum rate of diversion Do not record my water use but keep my name on mailing ilst. (No fee required) Transfer this file to: (NEW OWNER'S FIRST NAME) (M. NAME) (LAST NAME) Company Name: . . Address: (MAILING ADDRESS) (CITY) (STATE) (ZIP CODE) Telephone: () Effective Date: CHIRDLEMENTAL INCORNATION ients.

CERTIFICATION AND SIGNATURE: I certify that the lorgoing state	tements are true and	correct to the best of my knowledge.
Ignature: Sourcey - Ben	لدور	_Date 6-25-07
rinted Name DIANE		LOWERY-BINNE
ompany Name: LOS ANGEVES COUNTY	(M. NAME)	(LAST NAME
THIS SPACE FOR OFFICE USE ONLY		FL AMT:

PLEASE COMPLETE. SUBMIT THE ORIGINAL AND YE A COPY FOR YOUR RECORDS State of California, State Water Resources Con...... Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct. PRIMARY OWNER OF RECORD L A COUNTY WATERWORKS DIST NO 4 G193249

2006

RECORDATION NO:G193249 CONTACT PHONE NO:(626) 458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING L A COUNTY WATERWORKS DIST NO 4 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well

State Well Number 07N/12W-27F01 S

Parcel Number

AMT:

A.

DEADLINE: Notices must be received no later than June 30, 2007 in order to be recorded. REQUIRED FEES: A filling fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash. PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE If the above information is inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the coming

/ear.		•
I. TYPE OF DIVERSION 🕱 Groundwater extraction or 🗀 Surface diversion		
2. OWNERSHIP. Person listed below is:		
Owner of land on which well or point of diversion is located, and is extracting/diverting water.		
Lessee of land on which well or point of diversion is located, and is extracting/diverting water.		
Owner of land, but lessee is extracting/diverting water.	173	ecre-lee
Other: Please explain:		cubic-fee
AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR	(Must be a specific number)	⊟gallons
AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR		
METHOD OF MEASUREMENT Water Meter Power Meter Non-metered or Estimate	ed	□ acre-fee
TYPE OF WATER USE Agricultural Domestic or Municipal Other.	7	□ cubic-fee
ACTION REQUESTED (Check one):	Annual quantity	-
Reopen file. (Fee required)	Season of diversion	☐ gallons
☐ Close this file. (No fee required)	Begin	
Record my water use. (Fee required)	End	
Do not record my water use but keep my name on mailing list. (No fee required)	Maximum rate of diversion	
Company Name:		
	(CITY) (STATE)	(ZIP CODE)
Telephone: () Effective Date:	·	 -
SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new CERTIFICATION AND SIGNATURE: I certify that the forgoing statements are true and correct to the		, etc.) or any other co
gnature: _ Alexan Sorrey Benan Date_	6-26-07	
And No.		
rinted Name DIANE	LOWERY-BINNIT	
(FIRST NAME) (M. NAME)	LOWERY - BINNII	

P.O. BOX 2000, SACRAMENTO, CA 95812-2000 Info: (915) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov

ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

G193250

2006

if the owner information below is wrong or missing, please correct. PRIMARY OWNER OF RECORD L A COUNTY WATERWORKS DIST NO 4

> **RECORDATION NO: G193250** CONTACT PHONE NO:(626) 458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING L A COUNTY WATERWORKS DIST NO 4 900 S FREMONT AVE 9TH FL . ALHAMBRA, CA 91803-1331

Owner's Designation of Well

State Well Number 07N/12W-27F02 S Parcel Number

DEADLINE: Notices must be received no later than June 30, 2007 in order to be recorded. REQUIRED FEES: A filling fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your

recordation number(s) and be made payable to: State Water Resources Control Board	. Do not send cash.	
PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEF	ORE COMPLETING THIS N	IOTICE
If the above information is inaccurate, please line it out in red and provide current information. Notify this office	if ownership or address change	s occur during the coming
year.	_	•
1. TYPE OF DIVERSION of Groundwater extraction or Surface diversion		
2 OWNERSHIP. Person listed below is:		
Owner of land on which well or point of diversion is located, and is extracting/diverting water.		
Lessee of land on which well or point of diversion is located, and is extracting/diverting water.		≭ acre-feet
 ☐ Owner of land, but lessee is extracting/diverting water. ☐ Other Please explain: 	782	cubic-feet
3. AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR	(Must be a specific number)	<u> □gallons</u>
4. AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR		
5. METHOD OF MEASUREMENT Water Meter Power Meter In Non-metered or Estimated		□ acre-feet
6. TYPE OF WATER USE Agricultural Domestic or Municipal Other.		□ cubic-feet
7. ACTION REQUESTED (Check one):	Annual quantity	_
☐ Reopen file. (Fee required)	Season of diversion	_ ∟ gallons
☐ Close this file. (No fee required)	Begin	
Record my water use. (Fee required)	End Maximum rate of diversion	_
 Do not record my water use but keep my name on mailing list. (No fee required) 	waximum rate or diversion	
Manuscript F. 69		
Transfer this file to: (NEW OWNER'S FIRST NAME) (M. NAME)	4.457444	
(NEW OWNER'S FIRST NAME) (M. NAME) Company Name:	(LAST NAME)	
•		
Address:(MAILING ADDRESS) (AtmA Joseph Land	Till occur
Telephone: () Effective Date:	CITY) (STATE)	(ZIP CODE)
O CHOCH EMPATAL INFORMATION		
8. SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new la	nd irrigation, new method of Irrigatio	n, etc.) or any other comments
	<u></u>	
9. CERTIFICATION AND SIGNATURE: I certify that the forgoing statements are true and correct to the	book of mustra mulada a	
Signature: Date Date Date Date Date Date Date	6-26-07	
£		
(FIRST NAME) (M. NAME)	DWERY-BINNIE (LAST NAME	<u> </u>
Company Name: LOS ANGELES COUNTY	(CAS) NAME	
company names KN WOOD COOK!		
THIS SPACE FOR OFFICE USE ONLY	ь	ASPT.

PLEASE COMPLETE. SUBMIT THE ORIGINAL AND "E A COPY FOR YOUR RECORDS State of California, State Water Resources Com. at Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000 Info: (916) 341-5300, FAX: (916) 341-5400, Web: https://www.waterrights.ca.gov

ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

G193280

2006

if the owner information below is wrong or missing, please correct. PRIMARY OWNER OF RECORD LOS ANGELES COUNTY WATERWORKS

> RECORDATION NO:G193280 · CONTACT PHONE NO:(626) 458-7157

PRIMARY CONYACT OR AGENT FOR MAIL & REPORTING LOS ANGELES COUNTY WATERWORKS

LA COUNTY WATERWOOKS DIST NO.4

900 S FREMONT AVE 9TH FL

ALHAMBRA, CA 91803

State Well Number 07NV12W-09A S

Parcel Number

Owner's Designation of Well

DEADLINE: Notices must be received no later than June 30, 2007 in order to be recorded,

REQUIRED FEES: A filling fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

If the above information is inaccurate inlease line it put in red and provide current information. Notify this office if owners his or

yea	Pear.	orido carron intermidades. Hotay and on		ල හෝගීන ලදුනා තුරාබයි ගම දෙබාගම
1.	I. TYPE OF DIVERSION 🕱 Groundwater extraction or 🗆	1 Surface diversion	•	
2.	2. OWNERSHIP. Person listed below is:			
	Owner of land on which well or point of diversion is locate	d, and is extracting/diverting water.		
	 Lessee of land on which well or point of diversion is locate 			acre-feet
	Owner of land, but <u>lessee</u> is extracting/diverting water.		731	Cubic-feet
	Other: Please explain:		(Must be a specific r	
3.			(mastes a spesies)	□ guina
4.				
5.			led	☐ acre-feet
6.		ic or Municipal 📋 Other:		☐ cubic-feet
7.	· · · · · · · · · · · · · · · · · · ·		Annual quantity	gallons
	Reopen file. (Fee required)		Season of diversion	
	Close this file. (No fee required)		Begin End	 :
	Record my water use. (Fee required)		Maximum rate of diversion	
	□ Do not record my water use but keep my name on mailing	list. (No tee required)		***
Tra	ransfer this file to:			
	(NEW OWNER'S FIRST NA	ME) (M. NAME)	(LAST NA	MEI
	Company Name:			· · ·
	Address:			
	Address:(MAILING ADDRES	S)	(CITY) (ST/	ATE) (ZIP CODE)
	Telephone: ()	Effective Date:	(a)	
8.	CURRENTAL INCORNATION DISCORDA			
σ.	. SUPPLEMENTAL INFORMATION. Please list any changes in	i your project since last year (new pump, new	v land irrigation, new method of	irrigation, etc.) or any other comment
Q.	. CERTIFICATION AND SIGNATURE: I certify that the forgo	Nego etatemente era taua and correct to f	ha haat of mucky evolution	
٠.		,		
Sigi	ignature: Acom Borney. Bu	newDate_	6-26-07	
				e. l
Prin	rinted Name DIANE	/II NISIET	LOWERY-BIL	NIE-
_	V	(M. NAME)	' (LAST NAME	
Con	ompany Name: LOS ANGELES COUN	<u> </u>		
1				
TH.	THIS SPACE FOR OFFICE USE ONLY	-	R	AMT:

***PLEASE COMPLETE. SUBMIT THE ORIGINAL AND SEARCH OF CALIFORNIA, State Water Resources Co....J Board, Division of Water Rights
P.O. BOX 2000, SACRAMENTO, CA 95812-2000

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov

ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct.
PRIMARY OWNER OF RECORD LOS ANGELES COUNTY WATERWORKS

G193281

2006

RECORDATION NO:G193281 CONTACT PHONE NO:(626) 458-7157

FRIMARY CONTACT OR AGENT FOR MAIL & REPORTING

LOS ANGELES COUNTY WATERWORKS SIST NO 4

900 S FREMONT AVE 9TH FL

ALHAMBRA. CA 91803

Owner's Designation of Well

State Well Number 07N/12W-09C S

Parcel Number

DEADLINE: Notices must be received no later than June 30, 2007 in order to be recorded. REQUIRED FEES: A filling fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash. PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE if the above information is inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the coming 2. OWNERSHIP. Person listed below is: Owner of land on which well or point of diversion is located, and is extracting/diverting water. Lessee of land on which well or point of diversion is located, and is extracting/diverting water. Xacre-feet Owner of land, but lessee is extracting/diverting water. 6.30 □ cubic-feet Other: Please explain: (Must be a specific number) **□**gallons AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR METHOD OF MEASUREMENT Water Meter . Power Meter ☐ acre-feet ☐ Non-metered or Estimated TYPE OF WATER USE ☐ Agricultural 🂢 Domestic or Municipal 📋 Other: ___ □ cubic-feet ACTION REQUESTED (Check one); Annual quantity ☐ gallons Reopen file. (Fee required) Season of diversion Close this file. (No fee required) Bagin . End. ব্ৰ Record my water use. (Fee required) Maximum rate of diversion Do not record my water use but keep my name on mailing list. (No fee required) Transfer this file to: __ (NEW OWNER'S FIRST NAME) (M. NAME) (LAST NAME) Company Name: ___ Address: (MAILING ADDRESS) (CITY) (STATE) (ZIP CODE) Telephone: ()_ Effective Date: SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new land irrigation, new method of irrigation, etc.) or any other comments. 9. CERTIFICATION AND SIGNATURE: I certify that the forgoing statements are true and correct to the best of my knowledge.

Signature: Thou they - Bu	بر	Date 6-25-0	<u> </u>
Printed Name DIANE		LOWERY - 1	BINNIE
(FIRST NAME)	(M. NAME)	(LAST NAME	
Company Name: LOS ANGEVES COUNTY			
THIS SPACE FOR OFFICE USE ONLY		R	AMT:

***PLEASE COMPLETE. SUBMIT THE ORIGINAL AND State of California, State Water Resources Co...... Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000 Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov

ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct.

PRIMARY OWNER OF RECORD LOS ANGELES COUNTY WATERWORKS

G193282

2006

RECORDATION NO: G193282 CONTACT PHONE NO:(626) 458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING LOS ANGELES COUNTY WATERWORKS DIST NO4 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803

Owner's Designation of Well

State Well Number 07N/11W-20K S

Parcel Number

DEADLINE: Notices must be received no later than June 30, 2007 in order to be recorded.

REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEF	ORE COMPLETING THIS NO)TICE
I the above information is inaccurate, please line it out in red and provide current information. Notify this office	if ownership or address changes	occur during the con
ear,	_	_
I. TYPE OF DIVERSION		
C. OWNERSHIP. Person listed below is:		
Owner of land on which well or point of diversion is located, and is extracting/diverting water.		
 Lessee of land on which well or point of diversion is located, and is extracting/diverting water. Owner of land, but lessee is extracting/diverting water. 	245	Xacre-feet
Other: Please explain:	(Must be a specific number)	
. AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR	(mast de a special number)	□ å sinira
. AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR ————		
. METHOD OF MEASUREMENT Water Meter Power Meter Non-metered or Estimated		acre-feet
. TYPE OF WATER USE Agricultural Domestic or Municipal Other:	· ·	□ cubic-feet
. ACTION REQUESTED (Check one):	Annual quantity	. gallons
☐ Reopen file. (Fee required)	Season of diversion	L1 Agious
Close this file. (No fee required)	Begin	
Record my water use. (Fee required)	End	
Do not record my water use but keep my name on mailing list. (No fee required)	Maximum rate of diversion	
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ransfer this file to:		
(NEW OWNER'S FIRST NAME) (M. NAME)	(LAST NAME)	
Company Name;	(=	
Address:(MAILING ADDRESS) (CITY) (STATE)	(ZIP CODE)
Telephone: () Effective Date:	CITT) (SIMIE)	(ZIP CODE)
Lincolne Date.		
SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new la	and intention, new method of infantion	ate) or any other som
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CERTIFICATION AND SIGNATURE: I certify that the forgoing statements are true and correct to the	hart of any beauded	
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gnature:DateDate	6-26-07	
	-	
inted Name DIANE	LOWERY-BINN	IE_
(FIRST NAME) (M. NAME)	(LAST NAME	
ompany Name: Los ANGEVES COUNTY		
Let all the same of the same o		
THIS SPACE FOR OFFICE USE ONLY	R.	AMT.

PLEASE COMPLETE, SUBMIT THE ORIGINAL AND YE A COPY FOR YOUR RECORDS State of California, State Water Resources Co..... Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000 Info: (916) 341-5300, FAX: (916) 341-5400, Web: https://www.waterrights.ca.gov

ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

G193283

If the owner information below is wrong or missing, please correct. PRIMARY OWNER OF RECORD LOS ANGELES COUNTY WATERWORKS

> RECORDATION NO: G193283 CONTACT PHONE NO:(626) 458-7157

PRIMARY CONTACT OR AGENT FOR MAS, & REPORTING LOS ANGELES COUNTY WATERWORKS 6157 No 4 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803

Owner's Designation of Well -20180-55

THIS SPACE FOR OFFICE USE ONLY

State Well Number 07N/11W-20K S

Parcel Number

AMT:

DEADLINE: Notices must be received no later than June 30, 2007 in order to be recorded.

REQUIRED FEES: A filling fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash,

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE If the above Information is inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the coming year. 1. TYPE OF DIVERSION 2 Groundwater extraction or ☐ Surface diversion OWNERSHIP. Person listed below is: Owner of land on which well or point of diversion is located, and is extracting/diverting water. Lessee of land on which well or point of diversion is located, and is extracting/diverting water. acre-leet П Owner of land, but lessee is extracting/diverting water. □ cubic-feet Other: Please explain: (Must be a specific number) **□** gaRons AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR METHOD OF MEASUREMENT Water Mater Power Meter Non-metered or Estimated ☐ acre-feet TYPE OF WATER USE ☐ Agricultural X Domestic or Municipal ☐ Other: □ cubic-feet 7. ACTION REQUESTED (Check one): Annual quantity □ gallons Reopen file. (Fee required) Season of diversion Close this file. (No fee required) Begin . End Record my water use. (Fee required) X Maximum rate of diversion Do not record my water use but keep my name on mailing list. (No fee required) Transfer this file to: ___ (NEW OWNER'S FIRST NAME) (M. NAME) (LAST NAME) Company Name: Address: (MAILING ADDRESS) (CITY) (STATE) (ZIP CODE) Telephone: () Effective Date: SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new land infigation, new method of irrigation, etc.) or any other comments. CERTIFICATION AND SIGNATURE: I certify that the forgoing statements are true and correct to the best of my knowledge. Signature: Date DI ANE LOWERY-BINNIE Printed Name (M. NAME) Company Name:

PLEASE COMPLETE. SUBMIT THE ORIGINAL ANI (E A COPY FOR YOUR RECORDS
State of California, State Water Resources Co......) Board, Division of Water Rights
P.O. BOX 2000, SACRAMENTO, CA 95812-2000
info: (916) 341-5300, FAX: (918) 341-5400, Web: http://www.waterrights.ca.gov

ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct.
PRIMARY OWNER OF RECORD LOS ANGELES COUNTY WATERWORKS

G193284

2006

RECORDATION NO:G193284 CONTACT PHONE NO:(626) 458-7157

FRIMARY CONTACT OR AGENT FOR MAIL & REPORTING
LOS ANGELES COUNTY WATERWORKS 5157 No 4
900 S FREMONT AVE 9TH FL
ALHAMBRA, CA 91803

Owner's Designation of Well -21276 59

State Well Number 07N/11W-18R S

Parcel Number

DEADLINE: Notices must be received no later than June 30, 2007 in order to be recorded.

REQUIRED FEES: A filling fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

If the above information is inaccurate, please line it out in red and provide current information. Notify this office it ownership or address changes occur during the coming year.

1. TYPE OF DIVERSION		
2. OWNERSHIP. Person listed below is:		-
Owner of land on which well or point of diversion is located, and is extracting/diverting water.		
Lessee of land on which well or point of diversion is located, and is extracting/diverting water.		
☐ <u>Owner of land, but lessee</u> is extracting/diverting water.	3n	A acre-feet
Other: Please explain:		Cubic-feet
3. AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR	(Must be a specific number)	□gallons
4. AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR ————————————————————————————————————		
5. METHOD OF MEASUREMENT Water Meter Power Meter Non-metered or Estimated		□ acre-feet
6. TYPE OF WATER USE Agricultural Domestic or Municipal Other:		□ cubic-feet
7. ACTION REQUESTED (Check one):	Annual quantity	
Reopen file. (Fee required)	Season of diversion	_ U gallons
☐ Close this file. (No fee required)	Begin	
Σ Record my water use. (Fee required)	End	<u> </u>
Do not record my water use but keep my name on mailing list. (No fee required)	Maximum rate of diversion	
Transfer this file to:		
(NEW OWNER'S FIRST NAME) (M. NAME)	(LAST NAME)	
Company Name:	<u> </u>	
Address:(MAILING ADDRESS) (C		
(MA/LING ADDRESS) (C	CITY) (STATE)	(ZIP CODE)
Telephone: () Effective Date:	· · · · · · · · · · · · · · · · · · ·	<u> </u>
8. SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new last	nd irrigation, new method of krigatio	nn, etc.) or any other comments
	·	nn, etc.) or any other comments
9. CERTIFICATION AND SIGNATURE: I certify that the forgoing statements are true and correct to the	best of my knowledge.	
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9. CERTIFICATION AND SIGNATURE: I certify that the forgoing statements are true and correct to the Signature:	best of my knowledge. 6-26-07 OWELY-BINNIE	•
9. CERTIFICATION AND SIGNATURE: I certify that the forgoing statements are true and correct to the Signature: Date Continue C	best of my knowledge.	•
9. CERTIFICATION AND SIGNATURE: I certify that the forgoing statements are true and correct to the Signature:	best of my knowledge. 6-26-07 OWERY-BINNIE (LAST NAME	•
9. CERTIFICATION AND SIGNATURE: I certify that the forgoing statements are true and correct to the Signature: Date Certify that the forgoing statements are true and correct to the Date	best of my knowledge. 6-26-07 OWERY-BINNIE (LAST NAME	•

PLEASE COMPLETE. SUBMIT THE ORIGINAL ANT XE A COPY FOR YOUR RECORDS
State of California, State Water Resources Co.....il Board, Division of Water Rights
P.O. BOX 2000, SACRAMENTO, CA 95812-2000
Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov

ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct.
PRIMARY OWNER OF RECORD LOS ANGELES COUNTY WATERWORKS

G193285

2006

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING

LOS ANGELES COUNTY WATERWORKS DIST NO 4

900 S FREMONT AVE 9TH FL

ALHAMBRA, CA 91803

THIS SPACE FOR OFFICE USE ONLY

State Well Number 07N/11W-18R S

Parcel Number

AMT:

RECORDATION NO:G193285 CONTACT PHONE NO:(626) 458-7157

DEADLINE: Notices must be received no later than June 30, 2007 in order to be recorded. REQUIRED FEES: A filling fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash. PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE If the above information is inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the coming year. 1. TYPE OF DIVERSION > Groundwater extraction or □ Surface diversion 2. OWNERSHIP, Person listed below is: Owner of land on which well or point of diversion is located, and is extracting/diverting water. Lessee of land on which well or point of diversion is located, and is extracting/diverting water. X acre-feet Owner of land, but lessee is extracting/diverting water. 290 □ cubic-feet Other: Please explain: (Must be a specific number) **□galions** AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR METHOD OF MEASUREMENT Water Meter | Power Meter □ acre-feet □ Non-metered or Estimated TYPE OF WATER USE ☐ Agricultural 🗶 Domestic or Municipal 🔲 Other: ____ □ cubic-feet ACTION REQUESTED (Check one): Annual quantity. 🖂 gallons Reopen file. (Fee required) Season of diversion Close this file. (No fee required) Begin End X Record my water use. (Fee required) Maximum rate of diversion Do not record my water use but keep my name on mailing list. (No fee required) Transfer this file to: (NEW OWNER'S FIRST NAME) (M. NAME) (LAST NAME) Company Name: Address: (MAILING ADDRESS) (CITY) (STATE) (ZIP CODE) Telephone: () Effective Date: SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new land imigation, new method of irrigation, etc.) or any other comments. CERTIFICATION_AND SIGNATURE: I certify that the forgoing statements are true and correct to the best of my knowledge. Signature: DIME Printed Name (FIRST NAME) (M. NAME) Company Name: angeves

PLEASE COMPLETE. SUBMIT THE ORIGINAL AN KE A COPY FOR YOUR RECORDS
State of California, State Water Resources Co....J Board, Division of Water Rights
P.O. BOX 2000, SACRAMENTO, CA 95812-2000

Info: (916) 341-5309, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov
ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct.

PRIMARY OWNER OF RECORD L A COUNTY WATERWORKS DIST NO 4

G193397

2006

RECORDATION NO:G193397 CONTACT PHONE NO:(626) 458-7157

PRIMARY CONTACT OR AGENT FOR MALL& REPORTING L. A COUNTY WATERWORKS DIST NO 4 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well

THIS SPACE FOR OFFICE USE ONLY

State Well Number 07NV12W-17F02 S

Parcel Number 3234-017-901

AMT:_

DEADLINE: Notices must be received no later than June 30, 2007 in order to be recorded. REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash. PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE If the above information is Inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the coming 1. TYPE OF DIVERSION X Groundwater extraction or Surface diversion 2. OWNERSHIP. Person listed below is: Owner of land on which well or point of diversion is located, and is extracting/diverting water. 耳 Lessee of land on which well or point of diversion is located, and is extracting/diverting water. acre-leet Owner of land, but lessee is extracting/diverting water. 824 □ cubic-feet Other: Please explain: (Must be a specific number) □gallons AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR METHOD OF MEASUREMENT X Water Meter Power Meter □ acre-feet ☐ Non-metered or Estimated 6. TYPE OF WATER USE ☐ Agricultural Domestic or Municipal ☐ Other: □ cubic-feet 7. ACTION REQUESTED (Check one): Annual quantity_ □ galions Reopen file. (Fee required) Season of diversion Close this file. (No fee required) Begin. End, Record my water use. (Fee required) Maximum rate of diversion Do not record my water use but keep my name on mailing list. (No fee required) Transfer this file to: ___ (NEW OWNER'S FIRST NAME) (M. NAME) (LAST NAME) Company Name: Address: (MAILING ADDRESS) (CITY) (STATE) (ZIP CODE) Telephone: () Effective Date: SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new land infigation, new method of irrigation, etc.) or any other comments. CERTIFICATION AND SIGNATURE: I certify that the forgoing statements are true and correct to the best of my knowledge. 6-25-00 Signature: Date LOWERY - BINNE Printed Name (M. NAME) Company Name: anceles COUNTY

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov
ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

2006

G193481

If the owner information below is wrong or missing, please correct.
PRIMARY OWNER OF RECORD LOS ANGELES COUNTY WATERWORKS DISTRICT NO 40

RECORDATION NO:G193481 CONTACT PHONE NO:(626) 300-3306

PRIMARY CONTACT OR AGENT FOR MARL & REPORTING
LOS ANGELES COUNTY WATERWORKS DISTRICT NO 40
900 S FREMONT AVE
ALHAMBRA, CA 91803

Owner's Designation of Well WELL 4-61 State Well Number 07N/12W-21C008 S Parcel Number 3123-001-901

DEADLINE: Notices must be received no later than June 30, 2007 in order to be recorded.

REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

If the above information is inaccurate, please line it out in red and provide current information.	Notify this office if ownership or address changes occur during the coming
year.	

, 		
I. TYPE OF DIVERSION ☐ Groundwater extraction or ☐ Surface diversion		
2. OWNERSHIP. Person listed below is:		
Owner of land on which well or point of diversion is located, and is extracting/diverting water.		
Lessee of land on which well or point of diversion is located, and is extracting/diverting water.	/! A	acre-feet
Owner of land, but <u>lessee</u> is extracting/diverting water.	458	aubic-feet
Other: Please explain:	(Must be a specific number)	galions
AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR		23
AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR		
i. METHOD OF MEASUREMENT 🗹 Walter Meter 🔲 Power Meter 🔲 Non-metered or Estimated	•	acre-feet
i. TYPE OF WATER USE Agricultural 🔀 Domestic or Municipal 🗆 Other:	_	□cubic-feet
. ACTION REQUESTED (Check one):	Annual quantity	_ gallons
☐ Reopen file. (Fee required)	Season of diversion	
Close this file. (No fee required)	Begin End	
Record my water use. (Fee required)	Maximum rate of diversion	
□ Do not record my water use but keep my name on mailing list, (No fee required)		
ransfer this file to:	0.445111145	
(NEW OWNER'S FIRST NAME) (M. NAME)	(LAST NAME)	
Company Name:		·
Address:(MAILING ADDRESS)(
(MAILING ADDRESS)	CITY) (STATE)	(ZIP CODE)
Telephone: () Effective Date:		
. SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new la	and impation, new method of trigation	n, etc.) or any other comm
CERTIFICATION AND SIGNATURE: I certify that the forgoing statements are true and correct to the	• •	
ignature: Alcum Boy. Burn Date	6-26-07	
rinted Name DANE	LOWERY-BIN	NE
(FIRST NAME) (M. NAME) . Company Name: LOS ANGEVES COUNTY	(LAST NAME	
THIS SPACE FOR OFFICE USE ONLY	R	ANT:

PLEASE COMPLETE. SUBMIT THE ORIGINAL AN KE A COPY FOR YOUR RECORDS
State of California, State Water Resources C.....ol Board, Division of Water Rights
P.O. BOX 2000, SACRAMENTO, CA 95812-2000
Info: (916) 341-5300, FAX: (916) 341-5408, Web: http://www.waterrights.ca.gov

ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

G193482

2006

If the owner information below is wrong or missing, please correct.
PRIMARY OWNER OF RECORD LOS ANGELES COUNTY WATERWORKS DISTRICT NO 40

RECORDATION NO: G193482 CONTACT PHONE NO: (826) 300-3306

PRIMARY CONTACT OR MARTIFORMAL & REPORTING LOS ANGELES COUNTY WATERWORKS DISTRICT NO 40 900 S FREMONT AVE ALHAMBRA, CA 91803

Owner's Designation of Well WILL 4-53

THIS SPACE FOR OFFICE USE ONLY

State Well Number 07N/12W-27H008 8

Percel Number 3125-009-004

AMT:

DEADLINE: Notices must be received no later than June 30, 2007 in order to be recorded. REQUIRED FEES: A fiting fee of \$115.00 to required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash. PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE If the above information is fraccurate, please line it out in red and provide current information. Notity this office if cornership or address changes occur during the coming year. 1. TYPE OF DIVERSION (Coroundwater extraction or Distrace diversion) OWNERSHIP. Person listed below is: Owner of land on which well or point of diversion is located, and is extracting/diversing water. Lessee of kind on which well or point of diversion is located, and is extracting/diverting water. acre-lest Owner of land, but lesses is extracting/diverting water. 283 □ cubic-feet Other: Please explain: (Neutrine officers a sed tauM) AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR METHOD OF MEASUREMENT 12 Water Meter | Power Meter □ acre-feat ☐ Non-matered or Estimated TYPE OF WATER USE 🗖 Agricultural 🙎 Domestic or Municipal 🗖 Other: ☐ cubic-leat ACTION REQUESTED (Check one): Annual quantity □ gallons Reopen file. (Fee required) Season of diversion Close this file. (No fee required) Begin, Fred শ্ Record my water use. (Fee required) Maximum rate of diversion Do not record my water use but losep my name on mailing list. (No fee required): Transfer this file to: (NEW OWNER'S FIRST NAME) (AL NAME) (LAST NAME) Company Name: Address: (MAILING ADDRESS) (CITY) (STATE) (ZIP CODE) Telephone: () Effective Date: SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new land infgation, new method of infgation, etc.) or any other comments. CERTIFICATION AND SIGNATURE: I certify that the forgoing statements are true and correct to the best of my knowledge. Signature: OWERY-BINNIE Printed Name (M. NAME) (FIRBT NAME) Company Name: LO COUNT

G193483

2006

If the owner information below is wrong or missing, please correct.

PRIMARY OWNER OF RECORD LOS ANGELES COUNTY WATERWORKS DISTRICT NO 40

RECORDATION NO:G193483 CONTACT PHONE NO:(626) 300-3308

PRIMARY CONTACT OF AGENT FOR MAIL & REPORTING
LOS ANGELES COUNTY WATERWORKS DISTRICT NO 40
900 S FREMONT AVE
ALHAMBRA, CA 91803

Owner's Designation of Well WELL 4-64

State Well Number 07N/12W-27 S Parcel Number 3126-008-904

DEADLINE: Notices must be received no later than June 30, 2007 in order to be recorded.

REQUIRED FEES: A filling fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEF If the above information is inaccurate, please line it out in red and provide current information. Notify this office	ORE COMPLETING THIS NO if ownership or address changes	TICE
year.	,	
1. TYPE OF DIVERSION		
2. OWNERSHIP. Person listed below is:		
Owner of land on which well or point of diversion is located, and is extracting/diverting water.		
Lessee of land on which well or point of diversion is located, and is extracting/diverting water.		
Owner of land, but lessee is extracting/diverting water.	3(A	acre-leet
Other: Please explain:		□ cubic-feet
3. AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR	(Must be a specific number)	∏gallons
4. AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR		
5. METHOD OF MEASUREMENT Water Meter Power Meter Non-metered or Estimated		☐ acre-feet
6. TYPE OF WATER USE Agricultural X Domestic or Municipal Cher:		□ cubic-feet
7. ACTION REQUESTED (Check one):	Annual quantity	
☐ Reopen file. (Fee required)	Season of diversion	🖂 gallons
☐ Close this file. (No fee required)	Begin	
Record my water use. (Fee required)	End	
Do not record my water use but keep my name on mailing list. (No fee required)	Maximum rate of diversion	
☐ Do nor report and water research was traine out ustrilled list. (Mo tee tednied)		
Transfer this file to:	-	
(NEW OWNER'S FIRST NAME) (M. NAME)	(LAST NAME)	
Company Name;	(Electrone)	
Address:		
(MAILING ADDRESS) (C	CITY) (STATE)	(ZIP CODE)
Telephone: () Effective Date:		
S. SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new land). CERTIFICATION AND SIGNATURE: I certify that the forgoing statements are true and correct to the lightness. Date Printed Name (FIRST NAME) Company Name: LOS ANGELES COUNTY		
THIS SPACE FOR OFFICE USE ONLY	R/	AMT:

PLEASE COMPLETE. SUBMIT THE ORIGINAL AN KE A COPY FOR YOUR RECORDS
State of California, State Water Resources Co....oi Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000 Info: (916) 341-5300, FAX: (916) 341-5400, Web; http://www.waterrights.ca.gov

ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

2006

G192727

If the owner information below is wrong or missing, please correct.

PRIMARY OWNER OF RECORD LA COUNTY WATERWORKS DIST NO 24

RECORDATION NO:G192727 CONTACT PHONE NO:(818) 458-7156

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING **LA COUNTY WATERWORKS DIST NO 24** 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well NO 4

State Well Number 05N/10W-10E S

Parcel Number

DEADLINE: Notices must be received no later than June 30, 2007 in order to be recorded.

REQUIRED FEES: A filling fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVE	RSE SIDE BEFORE COMPLETING THIS NO	TICE
If the above information is inaccurate, please line it out in red and provide current information year.	. Notify this office if ownership or address changes of	occur during the comin
1. TYPE OF DIVERSION Groundwater extraction or Surface diversion		
3		
Owner of land on which well or point of diversion is located, and is extracting/diver		
Lessee of land on which well or point of diversion is located, and is extracting/dive	rting water.	acre-feet
Owner of land, but lessee is extracting/diverting water.	1 +2	_ aubic-feet
Other, Please explain;	(Must be a specific number)	
3. AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR		
4. AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR		 -
	netered or Estimated	acre-lest
6. TYPE OF WATER USE Agricultural Domestic or Municipal Colher:		□ cubic-feet
7. ACTION REQUESTED (Check one):	Annual quantity	☐ gallons
Reopen file. (Fee required)	Season of diversion	•
☐, Close this file. (No fee required)	Begin	
Record my water use. (Fee required)	End Maximum rate of diversion	
 Do not record my water use but keep my name on mailing list. (No fee required) 	i maximum rate of diversion	
Transfer this file to:		
(NEW OWNER'S FIRST NAME) (I	M. NAME) (LAST NAME)	
Company Name:		
Address:		
(MAILING ADDRESS)	(CITY) (STATE)	(ZIP CODE)
Telephone: () Effective Date:		
	-	
8. SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year		
8. SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year	r (new pump, new land infigation, new method of infigation,	etc.) or any other comme
O CERTIFICATION AND CONSTUDE A CONTROL OF THE CONTR		
CERTIFICATION AND SIGNATURE: I certify that the lorgoing statements are true.	and correct to the best of my knowledge.	
Signature:	Date <u>6-28-07</u>	
Olymorator		
Printed Name DIANE	LOWELY-BIL	国框
(FIRST NAME) (M. NAME)	(LAST NAME	
Company Name: LOS ANGELES COUNTY	<i>t</i>	
Antibarily statistics	· · · · · · · · · · · · · · · · · · ·	
THIS COACE FOR ASSICE FICE AND V		[

PLEASE COMPLETE, SUBMIT THE ORIGINAL ANIT (E A COPY FOR YOUR RECORDS State of California, State Water Resources Co..... Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000

Info: (916) 341-5300, FAX: (916) 341-5400, Web; httpp://www.waterrights.ca.gov

ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct. PRIMARY OWNER OF RECORD LA COUNTY WATERWORKS DIST NO 24 G193396

2006

RECORDATION NO: G193396 CONTACT PHONE NO:(818) 458-7156

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING **LA COUNTY WATERWORKS DIST NO 24** 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well

NO. 5

State Well Number 05N/10W-09H01 S

Parcel Number 2840-002-018

DEADLINE: Notices must be received no later than June 30, 2007 in order to be recorded.

REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEF	ORE COMPLETING THIS NOTICE	E
If the above information is inaccurate, please line it out in red and provide current information. Notify this office		
year.	•	•
1. TYPE OF DIVERSION ☼ Groundwater extraction or ☐ Surface diversion		
2. OWNERSHIP. Person listed below is:		
Money of land on which well or point of diversion is located, and is extracting/diverting water.		
Lessee of land on which well or point of diversion is located, and is extracting/diverting water.		⊠ acre-feet
Owner of land, but lessee is extracting/diverting water.	52	□ cubic-feet
Olher: Please explain:	(Must be a specific number)	□gallons
3. AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR	finestes a specific framesi	C Sallous

_	ч	Ottier Liegge exhib	JI &		(Must be a specific number)	
3.	AM	OUNT OF GROUN!	DWATER EXTRACTED DURING CALENDA	R YEAR	,	
4.	AM	OUNT OF SURFAC	E WATER DIVERTED DURING CALENDAR	YEAR -	1	
5,	ME	THOD OF MEASUR	REMENT 🖄 Water Meter 🖂 Power Meter	☐ Non-metered or Estimate	d	🗂 acre-feet
6.		E OF WATER USE	- Self-renter Self-rentered	☐ Ofher:		□ cubic-feet
7.	AC1	TION REQUESTED	(Check one):		Annual quantily	gations
		Reopen file. (Fee rec	quired)		Season of diversion	- 3-4010
		Close this file. (No te	e required)		Begin	
	X 1	Record my water use			End	
			ter use but keep my name on mailing list. (No fee	ramiradi	Maximum rate of diversion	
		40 mg 1000mg mg 110	and and but thoops they that the out that the life to	redance)		
Tra	nsfer	this file to:		•		
			(NEW OWNER'S FIRST NAME)	(M. NAME)	(LAST NAME)	
		Company Name:		<u>'</u>		
			The second second second	,	,	
		Address:				<u> </u>
		•	(MAILING ADDRESS)		(CITY) (STATE)	(ZIP CODE)

Telephone	e: ()	Effective Date:			
8. SUPPLEMEN	ITAL INFORMATION. Plea	se list any changes in your project since last year (ne	w pump, new land Irrigation, new	method of Infgation	, etc.) or any other comments
9. CERTIFICATI	ON AND SIGNATURE: 10	ertify that the forgoing statements are true and	correct to the best of my kno		_
Signature:	the state of the s	J- Lane			<u> </u>
Printed Name	DIANE		LOWELY.	- BINNIE	,
Company Name:	(FIRST NAME) LOS ANGE	(M. NAME) LÆS COUNTY	(LAST)	NAME	
THIS SPACE FOR OR	FEICE LISE ONLY			•	ALPY.

ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct.

PRIMARY OWNER OF RECORD L A COUNTY WATERWORKS DIST NO 27

G192550

2006

RECORDATION NO:G192550 CONTACT PHONE NO:(626) 458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING
L. A COUNTY WATERWORKS DIST NO 27
900 S FREMONT AVE 9TH FL
ALHAMBRA, CA 91803-1331

Owner's Designation of Well

State Well Number 05N/10W-07R S

Parcel Number

PEADLINE: Notices must be received no later than June 30, 2007 in order to be recorded.

REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwaler Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

If the above information is inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the coming year.

y e ar.					
1. T	YPE OF DIVERSION 🕱 GI	roundwater extraction or Surface diversion			
2. 0	WNERSHIP. Person listed	d below is:			
赵	Owner of land on which we	Il or point of diversion is located, and is extracting/divertin	ng water.		
	Lessee of land on which we	ell or point of diversion is located, and is extracting/diverting	ing water.		*C ()
		s extracting/diverting water.	•	656	Xacre-feet
	Other: Please explain:		-		cubic-feet
3. A	MOUNT OF GROUNDWAT	ER EXTRACTED DURING CALENDAR YEAR	→ ∟	(Must be a specific number)	□ga‰ns
4. Ai	MOUNT OF SURFACE WA	TÉR DIVERTED DURING CALENDAR YEAR 🛭 —		·-·	
5. M	ETHOD OF MEASUREMEN	NT 🔀 Water Meter 🗆 Power Meter 🗀 Non-met	tered or Estimated		acre-feet
	PE OF WATER USE	Agricultural Domestic or Municipal Other:			□ cubic-feet
7. A	CTION REQUESTED (Chec			nual quantity	gallons
	Reopen file. (Fee required)		•	ason of diversion	- H amone
	Close this file. (No fee requi			Begin	
)2 \$	Record my water use. (Fee		١.,	End	
		but keep my name on mailing list. (No fee required)	Ma	ximum rate of diversion	
	•	, ,,,,			
Transf	er this file to:				
		(NEW OWNER'S FIRST NAME) (M.	NAME)	(LAST NAME)	
	Company Name:				
	Address:	•			
		(MAILING ADDRESS)	(CITY) (STATE)	(ZIP CODE)
	Telephone: ()	Effective Date:	<u> </u>		· · · · · · · · · · · · · · · · · · ·
8. SL	PPLEMENTAL INFORMA	TION. Pleasa list any changes in your project since last year (new pump, new land in	rigation, new method of irrigation	n, etc.) or any other comm
		ATURE: I certify that the forgoing statements are true ar			
Signatt	ire: <u>Alean</u>	Bay Bow	Date	-26-07	
rinted	Name DIA	Cr-		OWERT-BIN	
	(FIRST)			(LAST NAME	
		NAME) (M. NAME)		(DAD) NAME	
ompa		WITHELES COUNTY		•	
		WITHELES COUNTY			AMT:

PLEASE COMPLETE, SUBMIT THE ORIGINAL ANI YE A COPY FOR YOUR RECORDS
State of California, State Water Resources Co... J. Board, Division of Water Rights
P.O. BOX 2000, SACRAMENTO, CA 95812-2000
Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov

ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

G193286

2006

If the owner information below is wrong or missing, please correct.

PRIMARY OWNER OF RECORD LOS ANGELES COUNTY WATERWORKS

RECORDATION NO:G193286 CONTACT PHONE NO:(626) 458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING LOS ANGELES COUNTY WATERWORKS 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803

Owner's Designation of Well

State Well Number 06N/12W-15H S

Parcel Number 3025-053-278

DEADLINE: Notices must be received no later than June 30, 2007 in order to be recorded.

REQUIRED FEES: A filling fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

If the above information is inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the coming year.

1. TYPE OF DIVERSION St. Groundwater extraction or Surface diversion

2. OWNERSHIP. Person listed below is:

	correct to the best of my knowledge. Date	
Printed Name (FIRST NAME) (M. NAME)	_Date 6-26-07 LOWELY-BINNIE	
Signature:	_Date 6-26-07 LOWELY-BINNIE	
Signature: Bone Bry Bene	Date <u>6-26-07</u>	
	•	
CERTIFICATION AND SIGNATURE: I certify that the forgoing statements are true and continuous co	correct to the best of my knowledge.	
8. SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new	w pump, new land inigation, new method of inigation	n, etc.) or any other comme
		-
Telephone: () Effective Date:	(CITY) (STATE)	(ZIP CODE)
Address:(MAILING ADDRESS)	(CITY) (STATE)	CIO COOP
(NEW OWNER'S FIRST NAME) (M. N/	IAME) (LAST NAME)	
Transfer this file to:		
Do not record my water use but keep my name on mailing list. (No fee required)	The state of the s	
TAL Record my water use. (Fee required)	End Maximum rate of diversion	
☐ Close this file. (No fee required)	Begin	
Reopen file. (Fee required)	Annual quantity Season of diversion	_ □ gallons
6. TYPE OF WATER USE ☐ Agricultural ☐ Domestic or Municipal ☐ Other: ☐ 7. ACTION REQUESTED (Check one):		□ cubic-feet
5. METHOD OF MEASUREMENT Water Meter Power Meter Non-metere		🗖 acre-feet
4. AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR —		
3. AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR	(Must be a specific number)	@gállons
☐ Other. Please explain;	300	Cubic-feet
		Alecre-leet
Owner of land, but lessee is extracting/diverting water.	water	
Owner of land, but lessee is extracting/diverting water.	water.	

PLEASE COMPLETE. SUBMIT THE ORIGINAL AND **KE A COPY FOR YOUR RECORDS** State of California, State Water Resources Co. J Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000 Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov

ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

2006

G193395

If the owner information below is wrong or missing, please correct. PRIMARY OWNER OF RECORD L A COUNTY WATERWORKS DIST NO 35

> **RECORDATION NO: G193395** CONTACT PHONE NO:(626) 300-3395

PRIMARY CONTACT OR AGENT FOR MAR. & REPORTING L A COUNTY WATERWORKS DIST NO 35 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well WELL 2

THIS SPACE FOR OFFICE USE ONLY

State Well Number 05N/09W-04A01 S Parcel Number 3244-25-57

AMT:

DEADLINE: Notices must be received no later than June 30, 2007 in order to be recorded.

REQUIRED FEES: A filling fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEF	FORE COMPLETING THIS NO	TICE
If the above information is inaccurate, please line it out in red and provide current information. Notify this office	if ownership or address changes	occur during the coming
year.		•
1. TYPE OF DIVERSION 💆 Groundwater extraction or 🖂 Surface diversion		
2. OWNERSHIP. Person listed below is:		
Owner of land on which well or point of diversion is located, and is extracting/diverting water.		
Lessee of land on which well or point of diversion is located, and is extracting/diverting water.		M
Owner of land, but lessee is extracting/diverting water.	1 447	acre-feet
Other: Please explain:		Cubic-feet
3. AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR	(Must be a specific number)	galfons
4. AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR		
5. METHOD OF MEASUREMENT 🗵 Water Meler 🔲 Power Meter 📋 Non-metered or Estimated		☐ acre-feel
6. TYPE OF WATER USE Agricultural St Domestic or Municipal Cither:]	□ cubic-feat
7. ACTION REQUESTED (Check one):	Annual quantity	☐ gallons
☐ Reopen file. (Fee required)	Season of diversion	□ ganoris
Close this file. (No fee required)	Begin .	
Record my water use. (Fee required)	End	
☐ Do not record my water use but keep my name on mailing list. (No fee required)	Maximum rate of diversion	
Transfer this file to:(NEW OWNER'S FIRST NAME) (M. NAME) Company Name:(NEW OWNER'S FIRST NAME)	(LAST NAME)	
	<u>-</u>	
Address:		
	(CITY) (STATE)	(ZIP CODE)
Telephone: () Effective Date:		
SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new last year). CERTIFICATION AND SIGNATURE: I certify that the forgoing statements are true and correct to the	best of my knowledge.	etc.) or any other comment
Signature: Date	6-26-07	
	LOWERY - BINNI (LAST NAME	E
(FIRST NAME) (M. NAME)	(LAST NAME	· -
Company Name: LOS ANGELES COUNTY		

ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

G192865

2006

If the owner information below is wrong or missing, please correct.

PRIMARY OWNER OF RECORD LA COUNTY WATERWORKS DIST NO 38

RECORDATION NO:G192865 CONTACT PHONE NO:(626) 458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING
L. A COUNTY WATERWORKS DIST NO 38
900 S FREMONT AVE 9TH FL
ALHAMBRA, CA 91803-1331

Owner's Designation of Well WELL NO 1

State Well Number 06N/09W-10 S

Parcel Number

DEADLINE: Notices must be received no later than June 30, 2007 in order to be recorded. REQUIRED FEES: A filling fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash. PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE if the above information is Inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the coming year. 2. OWNERSHIP. Person listed below is: Owner of land on which well or point of diversion is located, and is extracting/diverting water. Lessee of land on which well or point of diversion is located, and is extracting/diverting water. Owner of land, but lessee is extracting/diverting water. Macre-feet □ cubic-feet Other: Please explain: (Must be a specific number) 3. AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR □ gallons AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR METHOD OF MEASUREMENT 🖄 Water Meter 🗆 Power Meter □ acre-feet 6. TYPE OF WATER USE ☐ Agricultural 💢 Domestic or Municipal ☐ Other: _ □ cubic-feet **ACTION REQUESTED (Check one):** Annual quantity □ gallons Reopen file. (Fee required) Season of diversion Close this file. (No fee required) Begin, ₩. Record my water use. (Fee required) Fnd Maximum rate of diversion Do not record my water use but keep my name on mailing list. (No fee required) Transfer this file to: (NEW OWNER'S FIRST NAME) (M. NAME) (LAST NAME) Company Name: _ Address: (MAILING ADDRESS) (CITY) (STATE) (ZIP CODE) Telephone: () Effective Date: SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new land irrigation, new method of irrigation, etc.) or any other comments.

Signature:	Date 6 ~ 26 ~ 07
Printed Name DIANE-	LOWERY-BINNIE
Company Name: LOS ANGELES COUNTY (M. NAME)	(LAST NAME
THIS SPACE FOR OFFICE USE ONLY	RAMT:

CERTIFICATION AND, SIGNATURE: I certify that the forgoing statements are true and correct to the best of my knowledge.

PLEASE COMPLETE. SUBMIT THE ORIGINAL ANT ** (E.A. COPY FOR YOUR RECORDS) State of California, State Water Resources Con...ul Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000 Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov

ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct. PRIMARY OWNER OF RECORD LA COUNTY WATERWORKS DIST NO 38 G193247

RECORDATION NO: G193247 CONTACT PHONE NO:(626) 458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING L A COUNTY WATERWORKS DIST NO 38 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well

State Well Number 06N/09W-10Q01 S

Parcel Number

DEADLINE: Notices must be received no later than June 30, 2007 in order to be recorded.

REQUIRED FEES: A filling fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should Indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash. PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE If the above information is inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the coming year. 1. TYPE OF DIVERSION X Groundwater extraction or 🗆 Surface diversion OWNERSHIP. Person listed below is: Owner of land on which well or point of diversion is located, and is extracting/diverting water. Lessee of land on which well or point of diversion is located, and is extracting/diverting water. acre-feet П Owner of land, but lessee is extracting/diverting water, 258 □cubic-feet Other: Please explain: (Must be a specific number) ⊟gallons AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR METHOD OF MEASUREMENT Mater Meter Power Meter acre-feet ■ Non-metered or Estimated 6. TYPE OF WATER USE ☐ Agricultural ☑ Domestic or Municipal ☐ Other: _ □ cubic-feet ACTION REQUESTED (Check one): Annual quantity ☐ gallons Reopen file. (Fee required) Season of diversion Close this file. (No fee required) Begin Record my water use. (Fee required) End Maximum rate of diversion Do not record my water use but keep my name on mailing list. (No fee required) Transfer this file to: (NEW OWNER'S FIRST NAME) (M. NAME) (LAST NAME) Company Name: Address: (MAILING ADDRESS) (CITY) (STATE) (ZIP CODE) Telephone: ()_ Effective Date:

SUPPLEMENTAL INFORMATION. Please list any changes in your proje	ct since last year (new pump, new land irrigation, new method of irrigation, etc.) or any other comm
CERTIFICATION AND SIGNATURE: 1 certify that the forgoing stater	ments are true and correct to the best of my knowledge.
nted Name DIANE	LOWELY- BINNIE
(FIRST NAME) mpany Name: LOS ANGELES COUNTY	(M. NAME) (LAST NAME
IIS SPACE FOR OFFICE USE ONLY	RAMT:

PLEASE COMPLETE. SUBMIT THE ORIGINAL AND YEA COPY FOR YOUR RECORDS
State of California, State Water Resources Co.il Board, Division of Water Rights
P.O. BOX 2000, SACRAMENTO, CA 95812-2000
info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov

ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct.

PRIMARY OWNER OF RECORD L A COUNTY WATERWORKS DIST NO 39

G193159

2006

RECORDATION NO:G193159 CONTACT PHONE NO:(818) 458-7158

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING L A COUNTY WATERWORKS DIST NO 39 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well NO 1

THIS SPACE FOR OFFICE USE ONLY

State Well Number 09N/01W-31R S Parcel Number

AMT:

DEADLINE: Notices must be received no later than June 30, 2007 in order to be recorded. REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash. PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE If the above information is inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the coming 2. OWNERSHIP. Person listed below is: Owner of land on which well or point of diversion is located, and is extracting/diverting water. Lessee of land on which well or point of diversion is located, and is extracting/diverting water. ₹ acre-feet Owner of land, but lessee is extracting/diverting water. □ cubic-feet Other: Please explain: **⊟**gallons (Must be a specific number) AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR METHOD OF MEASUREMENT Mater Meter Power Meter ☐ acre-feel ■ Non-metered or Estimated TYPE OF WATER USE ☐ Agricultural 🕱 Domestic or Municipal ☐ Other: ___ □ cubic-feet 7. ACTION REQUESTED (Check one): Annual quantily _ gallons Reopen file. (Fee required) Season of diversion Close this file. (No fee required) Begin_ End. Record my water use. (Fee required) Maximum rate of diversion Do not record my water use but keep my name on mailing list. (No fee required) Transfer this file to: (NEW OWNER'S FIRST NAME) (M. NAME) (LAST NAME) Company Name: Address: (MAILING ADDRESS) (CITY) (STATE) (ZIP CODE) Telephone: () Effective Date: SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new land irrigation, new method of irrigation, etc.) or any other comments. CERTIFICATION AND SIGNATURE: I certify that the forgoing statements are true and correct to the best of my knowledge. Signature: Printed Name (FIRST NAME (M. NAME) angeles Company Name:

Complete a separate notice for each well.

State of California

State Water Resources Control Board

State Well Number

Recordation Number

(Division of Water Rights Use Only)

DIVISION OF WATER RIGHTS

P.O. Box 2000, Sacramento, CA 95812-2000 Info: (916) 341-5300, FAX: (916) 341-5300, Web: http://www.waterrights.ca.gov

FIRST NOTICE **GROUNDWATER DIVERSION**

(Pursuant to Part 5, Division 2 of the Water Code)

. Name of person owning the well (Unless otherwise indicated, annual notice	·			
Address 900 S. FRI	EMONT AVE	<u>ALHANBRA</u>	CA State	<u>91803</u>
Telephone Number (626) 300		City	2/8/6	Zip Code
Name of person extracting groun	dwater (if different than Item 1)			•
Address	s or P.O. Box number	A'L		
		City	State	Zip Code
Telephone Number ()				
	WELL LOCA	ATION		
Owner's designation of well	<u>4-62</u> 4. c	county LOS ANGELE	:s	·
County Assessor's Parcel Number	r <u>3138 018 9</u>	°05		
Describe location of well to the n	egreet 40-acre quarter section S		-N/1214	- 15 U AA I
Describe location of well to the n		tate well number (if known) 07		-15 H 001
	<u>JE</u> 4, Section 15	tate well number (if known) 07		-15 H 001
		tate well number (if known) 07		-154001
Range _ Indicate location of well in the set	12W Section 15	tate well number (if known) 07 Township 7 N B. & M.	<u>, </u>	
Range Indicate location of well in the see marked. The place of use should	12W ction grid below, or provide a coalso be indicated. The grid representations of the grid representation of the grid representation.	Township 7 N B. & M. py of the USGS quadrangle mapesents one whole section.	<u>, </u>	
Range Indicate location of well in the see marked. The place of use should	12W Section 15	Township 7 N B. & M. py of the USGS quadrangle mapesents one whole section.	<u>, </u>	
Range _ Indicate location of well in the see marked. The place of use should Section	12W ction grid below, or provide a coalso be indicated. The grid representations of the grid representation of the grid representation.	Township 7 N B. & M. py of the USGS quadrangle map esents one whole section. Range 12W	<u>, </u>	
Range _ Indicate location of well in the see marked. The place of use should Section	12W ction grid below, or provide a column also be indicated. The grid representation, Township 7-N	Township 7 N B. & M. py of the USGS quadrangle map esents one whole section. Range 12W	<u>, </u>	
Range _ Indicate location of well in the see marked. The place of use should Section	12W ction grid below, or provide a column also be indicated. The grid representation, Township 7-N	Township 7 N B. & M. py of the USGS quadrangle map esents one whole section. Range 12W	<u>, </u>	
Range _ Indicate location of well in the see marked. The place of use should Section	12W ction grid below, or provide a column also be indicated. The grid representation, Township 7-N	Township 7 N B. & M. py of the USGS quadrangle map esents one whole section. Range 12W	<u>, </u>	
Range _ Indicate location of well in the see marked. The place of use should Section	12W ction grid below, or provide a column also be indicated. The grid representation, Township 7-N	Township 7 N B. & M. py of the USGS quadrangle map esents one whole section. Range 12W	<u>, </u>	
Range _ Indicate location of well in the see marked. The place of use should Section	12W ction grid below, or provide a column also be indicated. The grid representation, Township 7-N	Township 7 N B. & M. py of the USGS quadrangle map esents one whole section. Range 12W	<u>, </u>	
Range _ Indicate location of well in the see marked. The place of use should Section	12W ction grid below, or provide a column also be indicated. The grid representation, Township 7-N	Township 7 N B. & M. py of the USGS quadrangle map esents one whole section. Range 12W	<u>, </u>	
Range _ Indicate location of well in the see marked. The place of use should Section	12W ction grid below, or provide a column also be indicated. The grid representation, Township 7-N	Township 7 N B. & M. py of the USGS quadrangle map esents one whole section. Range 12W	'	

WATER USE

	ity and Use of water extra	cted and method used in de	etermining quar	ntity for the last ca	alendar year.	
٠		ACTIONS	When use is for irrigation		USB When use is other than imig	ntia-
Cálendar Year	Annual extractions in acre-fed or(specify unit)	or of estimate	Crops served	Acreage Supplied	When use is other than irrig Nature and extent of use, i.e. po products manufactured, number	pulation,
20 06	78	(specify) FLOW METER			of stock watered M&I	
0. Do vo	u also divert surface water	? No				
_		Yes or No	_		•	
i. If ansi	wer (to 10 above) is yes, he			4	-	
		tement of Water Diversion nual Recordation Notice p				
		propriative Water Right pr				
		ing				
		_			······································	,
			LL DATA	•	_	
2. Is the	place of use also served by	another well? YE	5	Another water	r source? YES	
3. If yes t	to either, describe TAZ 🛇	Yes or No 15TRICT IS SERVED	S BY MULTIP	LE WELLS AND	Yes of No \(\text{IMPORTED} \) STATE WAT	CER PE
5. Pump	tests					
5. Power	supply Conducted by	SON Date	,	Discharge rate gpm	Pump efficiency	
7. Depth	of well <u>550</u> `	Source feet.		ter No. sing diameter	Date installed	inches
ls well	gravel-packed? YES	7		te drilled	_	
	Yes or	No				
i. What a	re the upper and lower dep		Pupper	Z65 (Show feet f	Lower 530	
2. Is log o	of well available?	Where?	FILED	WITH DW		
B. Hasa o	Yes hemical analysis of well w	or No vater been made? YE	S If ves.	where can it he o	btained? DHS	
		Yes or	No	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
. Are wa	ter level measurements av	ailable? YES	Wher	e? FROM	DISTRICT	
I FACE	NIOTE THE AT.					
-	NOTE THAT:	natice is a misdamac	MAY MILWEIJA	nt to Soution F	008 of the Water Cod	_
\$115.00	O filing fee must acco	mpany each notice.	mor hareasi	it to section 3	ONO OF THE MARTEL COU	e.
I certif	y that the foregoing requ rrect to the best of my kn	ired statements and the flowledge and belief.	following optic	n al ad ditional st	atements, if any, are true	
Name	DIANE L	OWERY-BINNIE	_			
Signati	ire Den J	by-Bu				
	7 mar 1 3000 1	ENGINEER DE	ate 6-28	6-07		
Title _	SOMO COM F vorp.o.) ALHAI		ne <u>© 2</u> -	`		

Complete a separate notice for each well.

State of California State Water Resources Control Board

Recordation Number

State Well Number

(Division of Water Rights Use Only)

DIVISION OF WATER RIGHTS P.O. Box 2000, Sacramento, CA 95812-2000 Info: (916) 341-5300, FAX: (916) 341-5300, Web: http://www.waterrights.ca.gov

FIRST NOTICE **GROUNDWATER DIVERSION**

(Pursuant to Part 5, Division 2 of the Water Code)

. Name of person owning the well	to this name and address)	(
Address Office and Street address of P.O. Box n	AVE	ALHAMBRA	СД	91803
		City	State	Zip Code
Telephone Number (626) 300 - 330	<u>06</u>			
Name of person extracting groundwater (if di	ifferent than Item 1)			
AddressStreet address or P.O. Box n				
	-	City	State	Zip Code
Telephone Number ()				
	WELL LOCATION			
Owner's designation of well4-63	54. County_	LOS ANGELE	55	
County Assessor's Parcel Number		,		
Describe location of well to the person 40 and	· · · · · · · · · · · · · · · · · · ·		Jahres	200-
			•	<u>- 30Q004</u>
Describe location of well to the nearest 40-acr			•	<u>- 30Q004</u>
_SW 4, of SE		_, Township	•	<u>'-30Q004</u>
_SW 4, of SE	4, Section 030 Lelow, or provide a copy of the	, Township 8 N B. & M.		
Range	24, Section 030 Elow, or provide a copy of the cated. The grid represents on	Township 8 N B. & M. e USGS quadrangle map ne whole section.		
SW ¼, of SE Range	elow, or provide a copy of the cated. The grid represents on in 8 N, Rang	, Township 8 N B. & M. c USGS quadrangle map ne whole section.		
Range	elow, or provide a copy of the cated. The grid represents on in 8 N, Rang	, Township 8 N B. & M. c USGS quadrangle map ne whole section.		
Range	elow, or provide a copy of the cated. The grid represents on in 8 N, Rang	, Township 8 N B. & M. c USGS quadrangle map ne whole section.		
Range	elow, or provide a copy of the cated. The grid represents on in 8 N, Rang	, Township 8 N B. & M. c USGS quadrangle map ne whole section.		
Range	elow, or provide a copy of the cated. The grid represents on in 8 N, Rang	, Township 8 N B. & M. c USGS quadrangle map ne whole section.		
Range	elow, or provide a copy of the cated. The grid represents on in 8 N, Rang	, Township 8 N B. & M. c USGS quadrangle map ne whole section.		
Range	elow, or provide a copy of the cated. The grid represents on in 8 N, Rang	, Township 8 N B. & M. c USGS quadrangle map ne whole section.		
Range	elow, or provide a copy of the cated. The grid represents on in 8 N, Rang	, Township 8 N B. & M. c USGS quadrangle map ne whole section.		
Range	elow, or provide a copy of the cated. The grid represents on in 8 N, Rang	, Township 8 N B. & M. c USGS quadrangle map ne whole section.		

WATER USE

1	Quantity and Use of water extracted and method used in dete				USB	
Calendar	EXTRACT		When use	is for irrigation		use is other than irrigation
Year	Annual extractions in acre-feet or(specify unit)	Method of measurement or of estimate- (specify)	Crops served	Acreage Supplied	Nature and	extent of use, i.e. population, anufactured, number and kind of stock watered
2006	В	FLOW METER	J ·		14	&I
	b. Under Annuac. Under Appropria	Yes or No Yes or No are you reporting surface ent of Water Diversion a I Recordation Notice pro oriative Water Right pro	and Use proceduces		C]]
		WEL	L DATA			•
2. Is the p	lace of use also served by and	other well? YES	,	Another water	source?	YES
3. If vest	either, describe THC_DISTA	Yes of No	Mindia e n	lens & A.M. Lus	2. a 16. A 44.	Yes or No
	nake and horsepower of pump				-	
5. Pump t	ests					
6. Power s		SON	,)ischarge rate gpm	,	Pump efficiency
7. Depth o	fwell130	ce feet.		er No. sing diameter	12	Date installed inches
Y11	gravel-packed? YES		20. Dat	e drilled2	12004	·
9. Is well	Ves or No.				•	
1. What a	Yes or No the upper and lower depths	-	Upper	<u>80</u>	_ Lower	110
1. What a	Yes or No	-	Upper	80 IITH Show feet f	Lower_ rom ground su	
1. What an 2. Is log o	Yes or No the upper and lower depths	Where?	Upper		tom ground su	rface)
1. What an 2. Is log on 3. Has a cl	Yes or No te the upper and lower depths fwell available? Yes or No Yes or No	Where?	Upper	Show feet f	tom ground su btained?	rface)
1. What and 2. Is log of 3. Has a class of 4. Are was been willful to the control of the control	Yes or No te the upper and lower depths f well available? Yes or No Yes or No nemical analysis of well wate	Where? Where? Yo where? Yo or N ble? Yo or N tice is a misdemean	Upper	Show feet for the second state of the second state of the second	tom ground subtained?	rface)
1. What and 2. Is log of 3. Has a class a class a class a class a class at the clas	Yes or No te the upper and lower depths f well available? Yes or No Yes or No The memical analysis of well wate er level measurements availa NOTE THAT: misstatement in this no	Where? Where? Where? Yes or N Where? Where?	Upper	Show feet for the section 5	btained?	e Water Code.
1. What and 2. Is log of 3. Has a class a clas	Yes or No te the upper and lower depths f well available? Yes or No Yes or No Yes or No Themical analysis of well wate er level measurements availa NOTE THAT: misstatement in this no filing fee must accomp that the foregoing requires rect to the best of my know	Where? Where? Where? Yes or N Where? Where?	Upper	Show feet for the section 5	btained?	e Water Code.
1. What and 2. Is log of 3. Has a class of 4. Are wall LEASE willful it \$115.00	Yes or No te the upper and lower depths f well available? Yes or No Yes or N	Where?	Upper	Show feet for the section 5	btained?	e Water Code.
1. What ar 2. Is log o 3. Has a cl 4. Are wat LEASE willful r \$115.00 I certify and cor Name Signatu	Yes or No te the upper and lower depths f well available? Yes or	Where? No repended where? Yes or Noble? Where? Yes or Noble? Where? Yes or Noble? Yes or Noble? Where? Yes or Noble?	Upper	where can it be one of the Section 5	btained?	e Water Code.

Complete a separate notice for each well.

State of California State Water Resources Control Board

Recordation Number

State Well Number

(Division of Water Rights Use Only)

DIVISION OF WATER RIGHTS

P.O. Box 2000, Sacramento, CA 95812-2000 Info: (916) 341-5300, FAX: (916) 341-5300, Web: http://www.waterrights.ca.gov

FIRST NOTICE GROUNDWATER DIVERSION

(Pursuant to Part 5, Division 2 of the Water Code)

Address	O		ces will be sent to		•			
11000	400	Street address	EMONT PORT	AVE_		ALHAMBRA- City	CA.	<u>91803</u>
						City	State	Zip Code
Telepho	ne Number (626) <u>390</u>	330(<u> </u>				
Name of	person <u>extr</u>	acting groun	dwater (if diff	erent than Item	1)			
						•	-	
		Street addres	s or P.O. Box num	nber	<u> </u>	City	State	Zip Code
Telephor	ne Number ()						
	·							
				WELL LO				
Owner's	designation	of well	4-66	4.	County	DS ANCELE	<u> </u>	 -
County A	Assessor's Pa	rcel Numbe	r					•
					-	ber (if known) 071	day	24 4 1 000
								- STIVOU
	<u>)</u>	, of	<u>~</u> ¼,	Section	<u>4</u> , To	wnship 7N		
		Range	12W		B. & N	1 .		
Indicate 1	ocation of w	ell in the se	ction erid helo	w. or provide a	conv of the LIS	3S quadrangle map v	uith tha wa	Il leastion
	The place of	fuse should	also be indicat	ted. The grid re	presents one wh	ole section.	Arm tite we	ar rocation
marked.	-					1041		
marked.		3 4	. Township	<i>+</i> N	Range	12W		
marked.	Section							
marked.	Section				, Range			
marked.	Section							
marked.	Section							
marked.	Section						·	
marked.	Section							
marked.	Section							
marked.	Section							
marked.	Section							
marked.	Section							

WATER USE

		ed and method used in det			monda year	•
	EXTRAC	TIONS	USI		USE	·
Calendar			When use	is for irrigation		ise is other than irrigation
Year	Annual extractions in acre-feet or(specify unit)	Method of measurement or of estimate- (specify)	Crops served	Acreage Supplied		extent of use, i.e. population, anufactured, number and kind of stock watered
2000	218	FLOW METER				&I
-	also divert surface water? er (to 10 above) is yes, how	Yes or No v are you reporting surface				
		ment of Water Diversion				
	b. Under Annı	ral Recordation Notice pro	cedures		D	
	c. Under Appr	opriative Water Right pro-	cedures	***********	🗀	
	d. Not reporting	g		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	•	WALKET :	L DATA			
_	_					۱ <i>۸</i> - س
Is the p	ace of use also served by a	nother well? YES	<u> </u>	_ Another wate	r source?	YES
If yes to	either, describe THE NST	Yes ot No RICT IS SERVED RYD	INTIPLE. WEL	LS AND IMPO	TED STAT	Yes or No E WATER PROVED IN
	take and horsepower of pur		Da	re maianed		
Pump te	Conducted by				. ,	
Power s	Conducted by Unpoly	Date Date	D	ischarge rate gpm		Pump efficiency
Depth o	upply <u>ES</u> f well <i>LØS</i> 6	urce feet.	Meter 18. Cas	n No. ing diameter	 ماا	Date installed inches
Is well g	ravel-packed? YES	>		e drilled		
	Yes or Ne the upper and lower depti	io.				
To 14	well available? YES	C	SUEN W	(Show feet 1	Lower _	face)
is log of	Well available?Yes o	Where?	FICEIS W	ILLE DWK	-	· · · · · · · ·
Has a ch	emical analysis of well wa	ter been made? YES or N	if yes,	where can it be o	btained?	DHS
Are wate	er level measurements avai	lable? YES	Where	FROM 1	XSTRICT	
FASE	NOTE THAT:					
	·	ation is a mission.		4.4- 61-42 5	000 - 043	X47. / O 1
711EEL 11	nisstatement in this n <u>filing fee</u> must accon	ouce is a misuemean	or pursuan	t to Section 5	OUS OI ENG	e Water Code.
		ihana cacii itorice.				
I certify and corr	that the foregoing requirect to the best of my kno	ed statements and the fo wledge and belief.	llowing option	al additional st	atements, i	fany, are true
Name _	•	JERY-BINNIE				
Signatur	e Dui To	J. Bon				
	senior Civil Engl	•	e 6-25	-07	· · · · · · · · · · · · · · · · · · ·	
	of P.O.) ALHAM	ደ በ ለ				

Complete a separate notice for each well.

State of California State Water Resources Control Board

DIVISION OF WATER RIGHTS

P.O. Box 2000, Sacramento, CA 95812-2000 Info: (916) 341-5300, FAX: (916) 341-5300, Web: http://www.waterrights.ca.gov

Recordation Number

State Well Number

(Division of Water Rights Use Only)

FIRST NOTICE **GROUNDWATER DIVERSION**

(Pursuant to Part 5, Division 2 of the Water Code)

,	Name of marcon and the second 105 ANCTITE			
٠.	Name of person owning the well LOS ANGELES (Unless otherwise indicated, annual notices will be sent to this name and add	COUNTY WATERWORKS	MSTRIC.	/ NO.40
	Address 900 S. FRE MONT AVE. Street address or P.O. Box number			
	Street address or P.O. Box number	City	State	Zip Code
	Telephone Number (626) 300 - 3306			
2.	Name of person extracting groundwater (if different than Item	1)		
	AddressStreet address or P.O. Box number			
	Street address or P.O. Box number	City	State	Zip Code
	Telephone Number ()			·
	WELL LO	DCATION		
	Owner's designation of well 4-67 4	. County LOS ANGEL	ES	
	County Assessor's Parcel Number			 ,
	Describe location of well to the nearest 40-acre quarter section	State wall womber (St)	Silon	1111000
	Carl San I	. State well humber (if known) O 1	MIEM	- 11 E DO 31
		1 Township 7N	<u> </u>	
	Range 12W,			
ı	Indicate location of well in the section grid below, or provide a marked. The place of use should also be indicated. The grid re	a copy of the USGS quadrangle map epresents one whole section.	with the we	II location
	Section \\ , Township \(\frac{1}{2} \text{N} \)	•		
	Quadrangle map пате			
				
		}		
				
	•			
		· · · · · ·		
			,	
	·		•	
		, (

WATER USE

	·			1	tity for the last o		
Calendar		CTRACTIONS		When use is for irrigation When			use is other than irrigation
Year	Annual extractions in acc or(specify unit)	re-feet Meil	nod of measurement or of estimate (specify)	Crops served	Acreage Supplied	Nature and	extent of use, i.e. population anufactured, number and k of stock watered
2006	459	FZ	NO METER	İ		<u> </u>	& I
0. Do you	also divert surface wa	ater?	NO				
		Ye	s or No	- . <u>.</u>			
1. II 411SW	er (to 10 above) is yes				1	_	-
			Water Diversion				
			rdation Notice pro				
			e Water Right pro				
	d. Not let		**********************	*******************	****************************	L	J
				L DATA			
2. Is the n	lace of use also served	l by another w	vella YES	÷	Another water	w eenween?	YES
p	lace of use also served either, describe HE	۰ میں مسامی اور . - میں مسامی ا	Yes or No	-	ALIVATEL WATE	a source (Yes or No
s. If yes to	either, describe ME	MATRICI I	S SERVED B	y multiple v	veus and in	ported St	TE WATER PROJEC
4. Туре, п	nake and horsepower o	of pump		Da	te installed		
5. Pump te	ests						
	estsConducted by		Date	E	ischarge rate gpm		Pump efficiency
		EDISON Source		·	er No.	·——	Date installed
. Depth o	f well 470		feet.	18. Cas	ing diameter	ماا	Date installed inc
). Is well:	gravel-packed?	150			e drilled		
	Ye	es or No			•		
. what at	e the upper and lower	depths of cas	ing perforations?				450
. Is log o	f well available?	YES	Where?	FLUED A	11TH DWR	from ground su	fface)
Has a cl	emical analysis of we	Yes or No		T.F		16	NIC
. 1105 a Ci	emical analysis of we	M water Deett	Yes or N	11 yes, '	wnere can it be (obtamed?	<u> </u>
Are wat	er level measurements	availahla?	YES	₩Лього	FROM D	SPICT	
	or 10 ver measurements	- availab161	100	Where	1 10010	(<u>)</u>	
	NOTE THAT:						
willful 1	nisstatement in th	iis notice i	s a misdemean	or pursuan	t to Section 5	5008 of the	e Water Code.
<u>\$115.00</u>	<u>filing fee</u> must ac	company	each notice.				
I certify	that the foregoing re	equired state	ments and the fo	llowing option	nal additional s	tatements, i	f any, are true
and cor	rect to the best of my	knowledge :	and belief.		~		
Name	DIANE I	DWERY	-BINME				
_		4					
Signatu	re Man	you	1- Zun				<u></u>
	Senior Civil r	ZMAINEEN	Dat	e <u>6-</u> 2	6 <i>-07</i>		
Title							

Complete a separate notice for each well.

State of California State Water Resources Control Board Recordation Number

State Well Number

(Division of Water Rights Use Only)

DIVISION OF WATER RIGHTS

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FIRST NOTICE **GROUNDWATER DIVERSION**

(Pursuant to Part 5, Division 2 of the Water Code)

			•	
1.	Name of person owning the well LOS ANGELES COUNT (Unless otherwise indicated, annual notices will be sent to this name and address)	Y NATERWORKS DE	STRICT	No. 40
	Address 900 S. FREMONT AVE. Street address or P.O. Box number	ALHAMBRA	CA	91803
	Telephone Number (626) 300 - 3306	City	State	Zip Code
2.				
	Address		••	
	Street address or P.O. Box number	City	State	Zip Code
	Telephone Number ()			
	WELL LOCATION	ON		
3.	Owner's designation of well 4-68 4. Count	LOS ANGELE	5	<u></u>
5,	County Assessor's Parcel Number			
5.	Describe location of well to the nearest 40-acre quarter section. State	well number (if kлоwn <u>) 07</u>	N/12W	-17F003S
	NE 4, of NW 4, Section 17	, Township 7N	•	
	Range 12W			
7.	Indicate location of well in the section grid below, or provide a copy of marked. The place of use should also be indicated. The grid represent	f the USGS quadrangle map s one whole section.	with the we	ll location
	Section 17 Township 7N R	ange 12.W ,		
	Quadrangle map name			

WATER USE

Quanti	ty and Use of water e	extracted and n	nethod used in dea	termining quan	tity for the last c			
	E	EXTRACTIONS		When use is for irrigation \			e is other than irris	ntion
Calendar Year	Annual extractions in acre-feet		Crops served	Acres		Nature and extent of use, i.e. population, products manufactured, number and kind of stock watered		
20 00	55	Flo	W METER				GI	
0. Do you	also divert surface w	vater?	No					
	er (to 10 above) is ye	Ye	es or No	a umtar usa?	•			
1. Huist			Water Diversion		inrae	П		
			rdation Notice pro					
			e Water Right pro					
			·····					
	-		With	L DATA				
	•						v.	
2. Is the pl	ace of use also serve	ed by another v	vell?	5	_ Another wate	r source?	<u> TES</u>	
3. If yes to	either, describe 146	DISTRICT	165 OI NO IS SERVED B	Y MOLTIPLE 4	/EUS AND I	upoeted st	Yes of No ATE WATER P	Posect
4. Type, n	ake and horsepower	of pump		Da	ite installed			
5. Pump te	sts					,		
6. Powers	cstsConducted by upply	EDISON	Date	I	Discharge rate gpm		Pump efficiency	
7. Depth o	f well <u>45</u>	OSource	feet.	Med 18. Cas	er No. sing diameter	عال	Date installed	inches.
9. Is well g	ravel-packed?	YES Yes or No		20. Dat	te drilled	1/2004		
I. What ar	e the upper and lowe	er depths of cas	sing perforations?	Upper	232	Lower_	430	
2. Is log of	well available?	YES	Where?	FILED I	(Show feet) WITH DWK	from ground sur	face)	
2 Donad		Yes or No						
, mas a cn	emical analysis of w	en water been	Inager Yes or h	li yes,	wnere can it be o	optained?	<u>-√1/~</u>	·
•	er level measurement				or FROM			
		™ σ±απα∩ι ρ ;		where	or	3/100-101		
	NOTE THAT:							
Willful I On 2112	nisstatement in t	this notice i	s a misdemear	nor pursuan	it to Section 5	5008 of the	Water Code	e.
<u> 9119.00</u>	filing fee must a	ccompany	each notice.					
I certify and cor	that the foregoing rect to the best of m	required state y knowledge	ements and the fo	ollowing optic	nal additional s	tatements, if	any, are true	
Name	DIANE L	LOWERY	- RINNIE	-				
		San	Bu	<u>-</u>			-	
Signatu	C 0000 C 000 1	Estatinges C	Da	te <u>6-24</u>	-07		· · · · · · · · · · · · · · · · · · ·	
8	<u>Senioc Civil I</u>	-14111						
Title	orp.o.) <u>AUHA</u>							

Complete a separate notice for each well.

State of California State Water Resources Control Board Recordation Number

State Well Number

(Division of Water Rights Use Only)

DIVISION OF WATER RIGHTS

P.O. Box 2000, Sacramento, CA 95812-2000 Info: (916) 341-5300, FAX: (916) 341-5300, Web: http://www.waterrights.ca.gov

FIRST NOTICE **GROUNDWATER DIVERSION**

(Pursuant to Part 5, Division 2 of the Water Code)

	900		LOS ANG				• !! • • • • • •		- 4
Address	100	Street address	EMONT A	VE.		A	LHAMBRA City	<u>CA</u>	<u>91803 </u>
							City	State	Zip Code
			<u>اطاه33</u> -						
Name of	регзол <u>extr</u>	acting groun	dwater (if diffe	rent than	Item 1)				·
Address			or P.O. Box numb						
		Street address	or P.O. Box numb	er			City	State	Zip Code
Telephon	e Number ()				•			
					L LOCAT				
Owner's d	lesignation	of well 4	4-69		4 Cour	J.	as anken	= <	
-				·	4. Cou	ity		<u></u>	
County A	ssessor's Pa	1 `` T !							
			•						
Describe l								7N/12W	1-34N00
	location of	well to the n	earest 40-acre q	uarter sec	ction. State	well nun	iber (if known) 0		1-34N00
	location of	well to the n	earest 40-acre q	quarter sec	ction. State	well nun	nber (if known <u>) O</u> ownship' 7 /		1-34N00
5	location of	well to the note of Standard Range	earest 40-acre q	quarter sec	ction. State	well nun , T	nber (if known <u>) O</u> ownship <u>7/</u> M.	<u>, </u>	
S	location of	well to the not good and good	earest 40-acre q	Section	34	well num , To	nber (if known <u>) O</u> ownship <u>7/</u> M. GS quadrangle ma	<u>, </u>	
Indicate lo	ocation of w	, ofS\ Range _ vell in the sec	LZW tion grid below	guarter section	ide a copy	B. & l of the USonts one wh	nber (if known) 0 ownship 7/1 M. GS quadrangle mande section.	<u>, </u>	
Indicate lo marked.	location of	Range_vell in the sec f use should	earest 40-acre quelle (%) // // // // // // // // // // // // //	Section	ide a copy	B. & I of the USents one wh	nber (if known) 0 ownship 7/ M. GS quadrangle materials section.	<u>, </u>	
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WATER USE

•	iy and Use (i water extracte	ed and method used in det	ermining quan	tity for the last c	alendar yea	r.	
	EXTRACTIONS			USE				
Catendar	A			When use	is for irrigation	When	use is other than irrig	ation
Year	or	ctions in acre-feet cify unit)	Method of measurement or of estimate (specify)	Crops served	Acreage Supplied	Nature and products m	extent of use, i.e. po anufactured, number of stock watered	pulation, and kind
<u>ما© 20</u>)	FLOW METEL			L	MGI	
). Do you	also divert :	surface water?	No	•	•			
			Yes or No are you reporting surface		-			
r. trátoa	a.		ment of Water Diversion a		ina.	~	7	
	и. b.		al Recordation Notice pro					
	c.		opriative Water Right pro-					
	d.		g					
	u.	Not reportin	5 ·····	46468++4+++4466	****************		J	
			WEL	L DATA				
. Is the ol	ace of use a	lso served by a	nother well? YES	ŝ	Amothan sunta		YES	
	U. 110V A	out totally 4)	Yes or No	<u>-</u>	_ Another water	source?	Yes or No	
. If yes to	either, desc	ribe IME DIST	Per of No Pet 15 Served BT	multiple w	eus and ima	CTED STA	TE WATER PAD	JECT C
. Туре, т	ake and hor	sepower of pun	np	Da	te installed			•
				-				
. Իասոր ա	Co	nducted by	Date	E	ischarge rate gpm		Pump efficiency	
. Power s	upply	EC	150N	,		,		
. Depth of	f well	684 Soi	Date Ircc feet.	Met 18 Cas	er No. ing diameter	ماا	Date installed	i-ab-a
		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	· · · · · · · · · · · · · · · · · · ·					_ inches
. Is well g	ravel-packe	d? YES	>	20. Dat	e drilled	12001		
. What are	the upper a	und lower depth	s of casing perforations?	Upper 4	34	Lower	664	
Is incref	well awild	do Yes	s of casing perforations?	FUEN	(Show feet f	rom ground su	rface)	"
10 108 01	TOTE GAMILIE	Yes or	No Where	7 1- 4-6-3	WINE D	VV F		
. Has a ch	emical analy	ysis of well wat	er been made?	If yes,	where can it be o	btained?	<u>Dhs</u>	
			Yes or N	a				
Are wate	r level mea:	surements avail	able? YES	Where	? FROM	DISTR	107	
EASE	NOTE TE	IAT.						
			otice is a misdemean	OF PRINCIPAN	t to Continu E	ህህዕ " ቲ ቲ ୮	. W. 4 C. J.	
\$115.00	filing fee	must accom	pany each notice.	or parsum	t to becului 3	AAO AT ITT	e water Code	.
			• •					
I certify	that the for	regoing require	ed statements and the fo	llowing option	ial additional st	atements, i	f any, are true	·
and cort	ect to the b	est of my know	vledge and belief.		•	· ·		
Name _	DIAN	JE LOW	NERY - BINNIE	<u>-</u>				
Signatur	e _ <i>IO</i>	? <i>\</i>	y Bu				<u> </u>	
Title	<u>Senior</u>	Civil Eng	iveev Date	e <u>6-2</u>	6-07			
At (City	of P.O.)	ALHAM	SPA					

Complete a separate notice for each well.

State of California State Water Resources Control Board

Recordation Number

State Well Number

(Division of Water Rights Use Only)

DIVISION OF WATER RIGHTS

P.O. Box 2000, Sacramento, CA 95812-2000 Info: (916) 341-5300, FAX: (916) 341-5300, Web: http://www.waterrights.ca.gov

FIRST NOTICE **GROUNDWATER DIVERSION**

(Pursuant to Part 5, Division 2 of the Water Code)

•	nual notices will be sent to this name and addres	•		
Address 900	S. FREMONT AVE.	ALHAMBRA	CA.	918a3
		City	. State	Zîp Code
Telephone Number (626)	300 - 33%			
Name of person extracting	g groundwater (if different than Item 1)		
Address				
Stre	et address or P.O. Hox number	City	State	Zip Code
Telephone Number (
	WELL LO	CATION		
Owner's designation of wa	ell <u>4-72</u> 4.	County LOS ANGELE	ی	
				•
	Number			
Describe location of well	to the nearest 40-acre quarter section.	State well number (if known) 07	<u>N/12w</u>	1-27F011
	NW 1/4, Section 2	7 Township 7N		
	Range 12W			
Indicate location of well in	n the section grid below, or provide a c should also be indicated. The grid rep	copy of the USGS quadrangle map versents one whole section.	with the we	ell location
Indicate location of well in marked. The place of use	n the section grid below, or provide a c should also be indicated. The grid rep	resents one whole section.	with the we	ell location
Indicate location of well in marked. The place of use Section	the section grid below, or provide a construction of the section grid below, or provide a construction of the section grid report of the section grid report of the section grid below, or provide a construction of the section grid below, or provide a construction of the section grid below, or provide a construction of the section grid below, or provide a construction of the section grid below, or provide a construction of the section grid below, or provide a construction of the section grid below, or provide a construction of the section grid below, or provide a construction of the section grid below, or provide a construction of the section grid below, or provide a construction of the section grid below, or provide a construction of the section o	Range \ZW	with the we	ell location
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WATER USE

	7.15.111	Different von	TONG	T		USE	_
alendar -		EXTRACT		When use	is for irrigation		use is other than irrigation
Year	Annual extractions or(specify up		Method of measuremer or of estimate (specify)	Crops served	Acreage Supplied	Nature an	ed extent of use, i.e. population manufactured, number and kin of stock watered
000	806		FLOW METER				MEI
		is yes, how a	are you reporting surf			•	
	a. U	nder Statem	ent of Water Diversion	on and Use proce	dures		
	b. U	nder Annua	Recordation Notice	procedures	******************		
			oriative Water Right p	_			
				••••••••••	***********************	***************	
			WE	ELL DATA			
s the pl	ace of use also s	erved by and	other well? Yes or	<u> </u>	_ Another wate	r source?_	YES Ves or No.
f yes to	either, describe	THE DISTR	KT IS SERVED B	Y MULTIPLE V	Veus AND IM	C assa	TATE WATER PROSECT
						-	
ump te	sts _			_			
ower si	Conduct apply	ed by	Date So N feet.		Discharge rate gpm		Pump efficiency
					er No. sing diameter		
s well g	ravel-packed? _	YES		20. Dat	e drilled	7/200	<u>* </u>
				s? Upper	390	Lower	570
log of	well available?	<u>Yes</u>	Where?	FILED	WITH DI	WG	unacej
as a ch	emical analysis o	Yes or North of well water	lo r been made? YE Yes o	If yes,	where can it be o	btained? _	DHS
re wate	r level measuren	nents availa	ble? YES	Where	PROM	DISTA	eic T
ASE I	OTE THAT	`:	•	• •			
llful n	isstatement i	in this no	tice is a misdeme any each notice.	anor pursuan	t to Section 5	6008 of th	ie Water Code.
		-	-				
certify ad corr	that the foregoi ect to the best o	ng required f my knowl	l statements and the edge and belief.	following option	nal additional s	atements,	if any, are true
ame	DINE	LOWERY	-BINNIE				
gnatur		- 2	Bul				<u> </u>
	<u>SEANOC CAN</u> orp.o.) <u>AL</u>	۲.		Date <u>6-24</u>	5-07		· · · · · · · · · · · · · · · · · · ·

***PLEASE COMPLETE.

SUBMIT THE OF

AL AND MAKE A COPY FOR YOUR RECORDS***

State of California, State Water Resources Control Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION G192722³G³2005*

2005

If the owner information below is wrong or missing, please correct. OWNER(S) OF RECORD COUNTY OF LOS ANGELES:

RECORDATION NO.: G192722 PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING: CONTACT PHONE NO.: (626)458-7157 **COUNTY OF LOS ANGELES** WATERWORKS & SEWER MAINT DIV

900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well WM J FOX AIRFIELD WELL NO 1

State Well Number 08N/13W-36N S

Parcel Number

AMT:

DEADLINE: Notices must be received no later than August 31, 2006 in order to be recorded.

REQUIRED FEES: A filling fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE If the above information is inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the coming year. TYPE OF DIVERSION 1. Groundwater extraction or Surface diversion OWNERSHIP. Person listed below is: Owner of land on which well or point of diversion is located, and is extracting/diverting water. Lessee of land on which well or point of diversion is located, and is extracting/diverting water. 78 Gcre-leet Owner of land, but lessee is extracting/diverting water. cubic-feet Other: Please explain: (Must be a specific number) gailons AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR 3. 4. AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR METHOD OF MEASUREMENT 6 Water Meler Power Meter Nonmetered or Estimated acre-feet 6. TYPE OF WATER USE cubic-teet Agricultural Domestic or Municipal Other: Annual quantity gallons Season of diversion 7, ACTION REQUESTED (Check one): Begin Close this file. (Files may be reopened at any time - fee required) End Maximum rate of diversion Record my water use. (Fee required) Do not record my water use but keep my name on mailing list. (No fee required) Transfer this file to: (NEW OWNER'S FIRST NAME) (M. NAME) (LAST NAME) Company Name: Address: (MAILING ADDRESS) (CITY) (STATE) (ZIP CODE) Telephone: (Effective Date: SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new land irrigation, new method of irrigation, etc.) or any other comments the forgoing statements are true and correct to the best of my knowledge.

Signature:

Printed Name (FIRST NAME)

(M. NAME) Company Name:

THIS SPACE FOR OFFICE USE ONLY

ASE COMPLETE. SUBMIT THE OK. IAL AND MAKE A COPY FOR YOUR RECORDS***
State of California, State Water Resources Control Board, Division of Water Rights ***PLEASE COMPLETE. P.O. BOX 2000, SACRAMENTO, CA 95812-2000

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION G1925433G32005*

2005

If the owner information below is wrong or missing, please correct. OWNER(S) OF RECORD L A COUNTY WATERWORKS DIST NO 4:

> RECORDATION NO.: G192543 CONTACT PHONE NO.: (626)458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING: L A COUNTY WATERWORKS DIST NO 4 DEPT OF PUBLIC WORKS 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well NO 5 INSTALLED 1947

State Well Number 07N/12W-22B S

Parcel Number

DEADLINE: Notices must be received no later than August 31, 2006 in order to be recorded.

REQUIRED FEES: A filling fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

	PLEASE READ THE	GENERAL INFORMATION ON T	IE REVERSE SIDE BEI	ORE COMPLET	ING THIS NOT	TICE	
If the	above information is inaccurate, plea	se line it out in red and provide current	information. Notify this off	ce if ownership or	address changes	occur during the	
comin	ig year.				•		
		water extraction or Surface diver	sion				
2.	OWNERSHIP. Person listed be						
. 6	Owner of land on which well or poi	nt of diversion is located, and is extract	ing/diverting water.			•	
`	Lessee of land on which well or po	int of diversion is located, and is extrac	ting/diverting water.	7 7 7	· · · · · · · · · · · · · · · · · · ·		
	Owner of land, but lessee is extract		•	93	v	<u>cubic-feet</u>	ا (
	Other: Please explain:			(Must be a	specific number)	cubicaea gallons	٠
3. /	AMOUNT OF GROUNDWATER	EXTRACTED DURING CALENDA	R YEAR				
4. /	AMOUNT OF SURFACE WATER	R DIVERTED DURING CALENDAR	YEAR				_
5. i	METHOD OF MEASUREMENT	Water Meter Power Meter	Nonmetered or Estimated			acre-feet	- [
3. 7	TYPE OF WATER USE	Agricultural Domestic or Municipal	Other:	Annual quantity		cubic-feet	-
	ATION	·		Season of divers		galions	-1
, <i>p</i>	ACTION REQUESTED (Check or			Begi	n		J
		eopened at any time – fee required)		l Eva			
	Record my water use. (Fee requ	•		Maximum rate of	diversion		
	Do not record my water use but	keep my name on mailing list. (No fee	required)				
	Transfer this file to:						
	Transfer this file to:	(NEW OWNER'S FIRST NAME)	(M. NAME)		AST NAME)		,
	Company Name:	<u> </u>			···· · · -		
	Address:						
		. (MAILING ADDRESS)	· · · · · · · · · · · · · · · · · · ·	(CITY)	(STATE)	(ZIP CODE)	
	Telephone: ()	Effective D	ate:	· ·	, ,		
	HDDI EMENTAL INFORMATION			•	•		
. 3	UPPLEMENTAL INFORMATION	 Please list any changes in your project si 	nce last year (new pump, new	land Irrigation, new r	nethod of inigation,	, etc.) or any other com	nen
_	<u> </u>						
^	EDTIFICATION OUR CONSTRU				··-		
	EKTIFICATION AND SIGNATUR	RE: I contify that the forgoing statemen	ts are true and correct to th	e best of my know	ledge,		

Signature: **Printed Name** (LAST NAME Company Name: THIS SPACE FOR OFFICE USE ONLY AMT: ***PLEASE COMPLETE. SUBMIT THE OR. -- MAL AND MAKE A COPY FOR YOUR RECORDS*** State of California, State Water Resources Control Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION *G1927293G32005*

2005

If the owner information below is wrong or missing, please correct. OWNER(S) OF RECORD LA COUNTY WATERWORKS DIST NO 4;

RECORDATION NO.: G192729 CONTACT PHONE NO.: (626)458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING: L A COUNTY WATERWORKS DIST NO 4 **DEPT OF PUBLIC WORKS** 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well

NO 15

Printed Name

Company Name:

THIS SPACE FOR OFFICE USE ONLY

State Well Number

Parcel Number

AMT:

07N/12W-11M S

DEADLINE: Notices must be received no later than August 31, 2006 in order to be recorded.

REQUIRED FEES: A filling fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

If the above information is inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the

	<u>Lessee</u> of land on which well or po <u>Owner</u> of land, but <u>[essee</u> is extra			diverting water. Idiverting water.		50	Gigre-1
	Other: Please explain:				(Must t	e a specific number)	gallon
). .	AMOUNT OF GROUNDWATER AMOUNT OF SURFACE WATE						
j.	METHOD OF MEASUREMENT TYPE OF WATER USE	Water Meter Power Meter Agricultural Domestic or Me	N	Conmetered or Estimated	Annual quan	tity	acre-fi cubic- gallon
•	ACTION REQUESTED (Check of	one):			Season of dir	version Regin	_
	Close this file. (Files may be	reopened at any time – fee req	uired)		E	nd e of diversion	_
	Record my water use. (Fee rec	· •	N- 6		- WOXIIIIGAI TEX	8 OI GIVEISIO	
	Transfer this file to:	t keep my name on mailing list. (No tee ted	urea)			
		(NEW OWNER'S FIRST NAME)		(M. NAME)		(LAST NAME)	<u>.</u>
	Address:	···					
	Telephone: ()	(MAILING ADDRESS)		:	(CITY)	(STATE)	(ZIP CODE)
	SUPPLEMENTAL INFORMATIO	M Diagon Palagon)	!	last was drawn			

PLEASE COMPLETE. SUBMIT THE O_{ther}IAL AND MAKE A COPY FOR YOUR RECORDS State of California, State Water Resources Control Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION *G192942³G³2005*

2005

If the owner information below is wrong or missing, please correct. OWNER(S) OF RECORD LACOUNTY WATERWORKS DIST NO 4;

RECORDATION NO.: G192942 CONTACT PHONE NO.: (626)458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING: L A COUNTY WATERWORKS DIST NO 4 DEPT OF PUBLIC WORKS 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well

WELL NO 22

THIS SPACE FOR OFFICE USE ONLY

State Well Number 07N/13W-24M S

Parcel Number

DEADLINE: Notices must be received no later than August 31, 2006 in order to be recorded.

REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Soard. Do not send cash.

lf th	e above information is inaccurate, please line it out in red and provide current information. Notify this office the please line it out in red and provide current information. Notify this office in the provided in the prov	ORE COMPLETING Se if ownership or add	<u>G THIS NOT</u> ress changes	ICE occur during the
1.	TYPE OF DIVERSION Groundwater extraction or Surface diversion			
2.	OWNERSHIP. Person listed below is:	•		
	Owner of land on which well or point of diversion is located, and is extracting/diverting water.			
	<u>Lessee</u> of land on which well or point of diversion is located, and is extracting/diverting water. <u>Owner</u> of land, but <u>lessee</u> is extracting/diverting water.	112	<u> </u>	acre feet
	Other: Please explain:	(Must be a spe	cific number)	cabic-leet gallons
3.	AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR			
4.	AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR			
5.	METHOD OF MEASUREMENT Water Meter Power Meter Nonmelered or Estimated	1		acre-feet
ô.	TYPE OF WATER USE Agricultural Domestic or Municipal Cther:	1		cubic-feet
	<u> </u>	Annual quantity Season of diversion		gallons
7.	ACTION REQUESTED (Check one):			•
	Close this file. (Files may be reopened at any time – fee required)	. End		
	Record my water use. (Fee required)	Maximum rate of dive	eusion	<u> </u>
	Do not record my water use but keep my name on mailing list. (No fee required)	<u> </u>		
	Transfer this file for			
	Transfer this file to:(NEW OWNER'S FIRST NAME) (M. NAME)		TAIALICS	·
	Company Name:	(LAS	T NAME)	
				
	Address:	<u> </u>		
	(MAILING ADDRESS) Telephone: () Effective Date:	(CITY)	(STATE)	(ZIP CODE)
	Telephone: () Effective Date:		 -	
_	SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new l	and infaatlass		-6-1 · · · · · · · · · · · · · · · · · · ·
	The same of the state of the same of the s	and imgavon, new mein	od of imgation,	etc.) or any other comme
	APRICIA LITALI AND GIOLIATURE			
•	CERTIFICATION AND SIGNATURE: I certify that the forgoing statements are true and correct to the	best of my knowledg	j e.	
ian	ature: Walfel W. O'Ellin Date	124/42/10	_	
ığıı	ature:Date	og age	y	
rint	red Name \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	" DAME	er66	÷й.
	(HIRST NAME)	(LAST NAME	<u> حالت کال</u>	21L_/
~~	nany Name: DS DOUBLES TO INTE	(=101 TOTALE		

PLEASE COMPLETE. SUBJET THE OR AL AND MAKE A COPY FOR YOUR RECORDS State of California, State Water Resources Control Board, Division of Water Rights P.O. BOX 2000. SACRAMENTO, CA 95812-2000

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrighte.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION *G1929453G32005*

2005

if the owner information below is wrong or missing, please correct. OWNER(8) OF RECORD L A COUNTY WATERWORKS DIST NO 4:

> RECORDATION NO.: G192945 CONTACT PHONE NO.: (628)458-7157

> > R.

樺

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING L A COUNTY WATERWORKS DIST NO 4 **DEPT OF PUBLIC WORKS** 900 8 FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well WELL NO 25

Signature:

Printed Name

Company Name:

TH路 線為軍 FOR OFFICE USE ONLY

State Well Number 07N/12W-21C 6

Parcel Number

DEADLINE: Notices must be received no later than August 31, 2006 in order to be recorded.

REQUIRED FEES: A fitting fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Weter Resources Control Board. Do not sand cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

If the above information is inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the coming year.

TYPE OF DIVERSION Groundwater extraction or Surface diversion 2 OWNERSHIP. Person listed below is: Owner of land on which well or point of diversion is located, and is extracting/diverting water. Lesses of land on which well or point of diversion is located, and is extracting/diverting water. 692 acre lee Owner of land, but lessee is extracting/diverting water. cubic feet Other: Piesse explain: (Must be a specific number) osilons AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR 4 doctories METHOD OF MEASUREMENT Water Meter Power Meter Nonmetered or Estimated cubic-feet TYPE OF WATER USE Agricultural Domestic or Municipal Other: Annual quantity onlions. Season of diversion ACTION REQUESTED (Check one): Begfin . End Close this file. (Files may be reopened at any time - fee required) Maximum rate of diversion Record my water use. (Fee required) Do not record my water use but keep my name on mailing list. (No fee required) Transfer this file to: (NEW OWNER'S FIRST NAME) (M. NAME) (LAST NAME) Company Name: _ Address: (MAILING ADDRESS) (CITY) (STATE) (ZIP CODE) Telephone: ()_ Effective Date: SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new land infigation, new method of infigation, etc.) or any other comments **CERTIFICATION** certify that the forgoing statements are true and correct to the best of my knowledge.

PLEASE COMPLETE. SUBMIT THE OL AL AND MAKE A COPY FOR YOUR RECORDS State of California, State Water Resources Control Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION *G193046³G³2005*

2005

If the owner information below is wrong or missing, please correct. OWNER(S) OF RECORD L A COUNTY WATERWORKS DIST NO 4:

> RECORDATION NO.: G193046 CONTACT PHONE NO.: (626)458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING: L A COUNTY WATERWORKS DIST NO 4 DEPT OF PUBLIC WORKS 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well

NO 27

Signature:

Printed Name

Company Name:

THIS SPACE FOR OFFICE USE ONL

State Well Number

Parcel Number

07N/12W-24M S

DEADLINE: Notices must be received no later than August 31, 2006 In order to be recorded.

REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

•	OWNERSHIP. Person listed be	•				
	•	nt of diversion is located, and is extra int of diversion is located, and is extr	- •	Γ		
	Owner of land, but lessee is extrac	•	actingrates only water.	1	99	acre-feet
		migration migration		(Must be	a specific number)	cubic-feet galions
	AMOUNT OF GROUNDWATER I		AR YEAR			
	AMOUNT OF SURFACE WATER	DIVERTED DURING CALENDA	AR YEAR	{		1.44
	METHOD OF MEASUREMENT	Water Meter Power Meter	Nonmetered or Estimated			acre-feet cubic-feet
	TYPE OF WATER USE	Agricultural Domestic or Municip	al Other:	Annual quantit	y	gallons
	ACTION REQUESTED (Check or	ne)·		Season of dive		•
	_	eopened at any time – fee required	n	Er	egin nd	
	Record my water use. (Fee requ		•1		of diversion	
		keep my name on mailing list. (No f	ee required)			
	Transfer this file to:	(NEW OWNER'S FIRST NAME)				
	Company Norway	(NEW OWNER'S FIRST NAME)	(M. NAME)		(LAST NAME)	
	Company Name:					
	Address:	· · · · · · · · · · · · · · · · · · ·				
	Tolonhono, ()	(MAILING ADDRESS)	Dota	(CITY)	(STATE)	(ZIP CODE)
	Telephone: ()	Eriective	e Date:		··········	

ertify that the forgoing statements are true and correct to the best of my knowledge.

(LAST NAME

AMT:

(M. NAME)

PLEASE COMPLETE. SUBMIT THE OR ___AL AND MAKE A COPY FOR YOUR RECORDS*** State of California, State Water Resources Control Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2900

Info: (916) 341-5300, FAX: (916) 341-5406, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION G1930483G32005*

2005

If the owner information below is wrong or missing, please correct. OWNER(8) OF RECORD L A COUNTY WATERWORKS DIST NO 4;

> RECORDATION NO.: G193048 CONTACT PHONE NO.: (828)458-7157

PRIMARY CONTACT OR ADMIT POR MAIL & REPORTING: L A COUNTY WATERWORKS DIST NO 4 DEPT OF PUBLIC WORKS 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well

Telephone: ()_

NO 29

State Well Number

Parcel Number

07W12W-34N S

DEADLINE: Notices must be received no later than Appuret 31, 2006 in order to be recorded.

REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

If the above information is inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the coming year.

1. TYPE OF DIVERSION Groundwater extraction or Surface diversion OWNERSHIP. Person listed below is: Owner of land on which well or point of diversion is located, and is extracting/diverting water. Lessee of land on which well or point of diversion is located, and is extracting/diverting water. 80% feet 639 Owner of land, but jessee is extracting/diverting water. cubic-feet Other: Please explain: (Must be a specific number) gallons AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR acro-foot 5. METHOD OF MEASUREMENT Water Meter Power Meter Nonmetered or Estimated cubic-feet TYPE OF WATER USE Agricultural Domestic or Municipal Annual quantity gallons Season of diversion ACTION REQUESTED (Check one): 7. Baoin Close this file. (Files may be reopened at any time – fee required) End Maximum rate of diversion. Record my water use. (Fee required) Do not record my water use but keep my name on mailing illet. (No fee required) Transfer this file to: (NEW OWNER'S FIRST NAME) (ML NAME) (LAST NAME) Company Name: _ Address:

SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new land intigation, new method of intigation, etc.) or any other comments

(arry)

(STATE)

(ZIP CODE)

	· · · · · · ·	
9. CERTIFICATION AND SIGNATURE 1 certify that the forgo	ling statements are true and correct to th	e best of my knowledge.
Signature: Wille W. O'allum	Date	08/22/06
Printed Name avid	w·	Pedersen
(FIRST NAME)	(M. NAME)	(LAST NAME
Company Name: LOS PINCLESOS	2 Countra	,
THES 記名 FOR OFFICE USE ONLY	/\	R. AET:

Effective Date:

(MAILING ADDRESS)

PLEASE COMPLETE. SUBMIT THE OI: IAL AND MAKE A COPY FOR YOUR RECORDS State of California, State Water Resources Control Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION *G1931073G32005*

2005

if the owner information below is wrong or missing, please correct. OWNER(S) OF RECORD L A COUNTY WATERWORKS DIST NO 4:

> RECORDATION NO.: G193107 CONTACT PHONE NO.: (626)458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING: L A COUNTY WATERWORKS DIST NO 4 DEPT OF PUBLIC WORKS 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well

NO 32

State Well Number 07N/12W-27 8

Parcel Number

DEADLINE: Notices must be received no later than August 31, 2006 in order to be recorded.

REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

lf th	PLEASE REAU TH se above information is inaccurate, ple	<u>E GENERAL M</u> ease line It out in	red and provide curren	<u>KE REVERSE SIDE BEI</u> Linformation - Notify this off	FORE COMPLET	ING THIS NOTE	CE
con	ning year.		rea are provide outland	CHAOSHEDOIG TROMY UND CAL	CO E ONINCIAI EP CI S	andresa critariñes d	cean arming the
1.		dwater extraction	n or Surface dive	rslon			
2.	OWNERSHIP. Person listed b						
	Owner of land on which well or po	oint of diversion i	s located, and is extrac	fina/diverting water.			•
	Lessee of land on which well or p	oint of diversion	is located, and is extra	cting/diverting water.		. (1	
	Owner of land, but lessee is extra				1 47	^{મુ} છે	Goro foot
	Other: Please explain:				Object here	specific number)	cubic-feet
3,	AMOUNT OF GROUNDWATER	EXTRACTED	DURING CALENDA	R YEAR	(1407.001		gallons
4.	AMOUNT OF SURFACE WATE	R DIVERTED	DURING CALENDA	RYEAR			
5.	METHOD OF MEASUREMENT			Nonmetered or Estimated	ſ		acro-feet
6.	TYPE OF WATER USE	Agricultural	Domestic or Municipal		1		cubic-feet
	·	-			Annual quantity _ Season of diversi		gallons
<i>'</i> .	ACTION REQUESTED (Check				Begin		
	Close this file. (Files may be	reopened at any	y time – fee required)	,	i Endi.		
	Record my water use. (Fee re	quired)			Maximum rate of	diversion	
	Do not record my water use bu	t keep my name	on mailing list. (No fee	reguland)			
	Transfer this file to:				•		
		(NEW OWNER!	S FIRST NAME)	(M. NAME)	(L	AST NAME)	
	Company Name:						
	Address:						
		(MAILIN)	G ADDRESS)	 -	(CITY)	(STATE)	/ZIP CODE)
	Telephone: ()	<u> </u>	Effective ()ate;			(AR COOK)
•	SUPPLEMENTAL INFORMATIO	N. Please list any	y changes in your project s	ince lest year (new pump, new	land Irrigation, new m	ethod of infgation, e	ic.) or early other comm
				•			
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	CERTIFICATION AND SIGNATU	RE: Log tily the	at the forgoing statemen	als are true and correct to th	ie besit of my knowl	edge.	
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	, 1 1/6	id V	VADDE "	County	(LAS) NA	WEG.	
	pany Name: VV		<u> </u>	VI MINIO			
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PLEASE COMPLETE. SUBMIT THE O. AL AND MAKE A COPY FOR YOUR RECORDS
State of California, State Water Resources Control Board, Division of Water Rights

P.O. BOX 2000, SACRAMENTO, CA 95812-2000 Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

G1930453G32005

2005

if the owner information below is wrong or missing, please correct. OWNER(S) OF RECORD LACOUNTY WATERWORKS DIST NO 4:

RECORDATION NO.: G193045 CONTACT PHONE NO.: (628)468-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING.

L A COUNTY WATERWORKS DIST NO 4.

DEPT OF PUBLIC WORKS.

900 S FREMONT AVE 9TH FL.

ALHAMBRA, CA 91803-1331

Owner's Designation of Well

NO 28

State Well Number

Parcel Number

07N/12W-15R S

DEADLINE: Notices must be received no later than August 31, 2006 in order to be recorded,

REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

ff to co. 1. 2.	PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFOR the above information is inaccurate, please line it out in red and provide current information. Notify this office thing year. TYPE OF DIVERSION — Groundwater extraction — or — Surface diversion OWNERSHIP. Person listed below is: Qwner of land on which well or point of diversion is located, and is extracting/diverting water.	DRE COMPLETING THIS NOT e if ownership or address changes	ICE occur during the
	Lessee of land on which well or point of diversion is located, and is extracting/diverting water. <u>Owner of land, but lessee</u> is extracting/diverting water.	685	acre-feet cubic-feet
	Other, Please explain:	(Must be a specific number)	gellions
3.	AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR		
4.	AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR		
5.	METHOD OF MEASUREMENT Water Meter Power Meter Nonumetered or Estimated	1	acre-feet
6.	TYPE OF WATER USE Agrituitural Domestic or Municipal Other:	Annuel quantity	cubic-feet gallons
_	ACTION PROMINATED (AL. I	Season of diversion	Amore
7.	ACTION REQUESTED (Check one):	Begin	
	Close this file. (Files may be reopened at any time – fee required)	End Meximum rate of diversion	 [
	Record my water use. (Fee required)	ARBANIANI 1216 DI CAVESSON	
	Do not record my water use but keep my name on mailing list. (No fee required) Transfer this file to:	•	
	(NEW OWNER'S FIRST NAME) (M. NAME) Company Name:	(LAST NAME)	<u> </u>
	Address:		
		CITY) (STATE)	(Z/P CODE)
	Telephone: () Effective Date:	(dixie)	ten coort
8. 9.	SUPPLEMENTAL INFORMATION. Please list any changes to your project since lest year (new pump, new is CERTIFICATION AND SIGNATURE: I sertify that the forgoing statements are true and correct to the	·	etc.) or any other comment
31gr	nature: Hall Wi Wellin Date	00/22/06	
Ήг	rted Name (FIRST NAME) (NAME)	HOGENS.	en)
	opany Name: LOS Andeles County	(COLITOR	
	B SPACE FOR OFFICE USE CALLY	R.	JAT:

PLEASE COMPLETE. SUBMIT THE OR __ AL AND MAKE A COPY FOR YOUR RECORDS State of California, State Water Resources Control Board, Division of Water Rights P.O. BOX 2080, SACRAMENTO, CA 95812-2000

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION *G193105³G³2005*

2005

If the owner information below is wrong or missing, please correct. OWNER(S) OF RECORD L A COUNTY WATERWORKS DIST NO 4:

RECORDATION NO.: G193105 CONTACT PHONE NO.: (626)458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING: L'A COUNTY WATERWORKS DIST NO 4 DEPT OF PUBLIC WORKS 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well

NO 30

Printed Name

Company Name:

THIS SPACE FOR OFFICE USE ONLY

(FIRST NAME)

State Well Number 07N/12W-34 S

Parcel Number

AMT:

DEADLINE: Notices must be received no later than August 31, 2006 in order to be recorded.

REQUIRED FEES: A filling fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

IE et	PLEASE READ THE	GENERAL INFORMATION ON	THE REVERSE SIDE BEF	<u>ORE COMPLETING THIS N</u>	<u>otice</u>
COT	ne above information is inaccurate, plea ning year.	se line it out in red and provide curre	nt information. Notify this offic	e if ownership or address chang	jes occur during the
1. 2,		water extraction or Surface div	rersion		
	Owner of land on which well or poir	nt of diversion is located, and is extra	cting/diverting water.		•
	<u>Lessee</u> of land on which well or point of land, but lessee is extractionally and the lessee is extracted a	int of diversion is located, and is extra ling/diverting water.	acting/diverting water.	597	acre-feet
	Other: Please explain:			(Must be a specific numbe	
3.	AMOUNT OF GROUNDWATER I				
4.	AMOUNT OF SURFACE WATER	L DIVERTED DURING CALENDA	AR YEAR		
5.	METHOD OF MEASUREMENT	Water Meter Power Meter	Nonmetered or Estimated		acre-feet
6.	TYPE OF WATER USE	Agricultural Domestic or Municipa	ol Other:	Annual quantity	cubic-feet gallons
7.	ACTION REQUESTED (Check or	ne):		Season of diversion	•
		eopened at any time – fee required	1	Begin End	"
	Record my water use. (Fee requ		,	Maximum rate of diversion	
	÷	keep my name on mailing list. (No fe	e required)		
	Transfer this file to:		io roquirou)		
	Transfer this file to:	(NEW OWNER'S FIRST NAME)	(M. NAMÉ)	(LAST NAME)	
	Company Name:	<u> </u>	<u> </u>		
	Addronn				
	Address:	(MAILING ADDRESS)		(CITY) (STATE)	(ZID CODE)
	Telephone: ()		Date:	(0111) (01AIE)	(ZIP CODE)
_					
8.	SUPPLEMENTAL INFORMATION	 Please list any changes in your project 	since last year (new pump, new l	and imgation, new method of imigati	ion, etc.) or any other comme
				Ť	
9.	CERTIFICATION AND SIGNATUR	E: Lartify that the forgoing stateme	ents are true and correct to the	e best of my knowledge.	

PLEASE COMPLETE. SUBMIT THE OR. ALL AND MAKE A COPY FOR YOUR RECORDS
State of California, State Water Resources Control Board, Division of Water Rights
P.O. BOX 2000, SACRAMENTO, CA 95812-2000

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov
ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

G1931083G32005

2005

If the owner information below is wrong or missing, please correct.

OWNER(S) OF RECORD LACOUNTY WATERWORKS DIST NO 4;

RECORDATION NO.: G193108 CONTACT PHONE NO.: (626)458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING:

L A COUNTY WATERWORKS DIST NO 4
DEPT OF PUBLIC WORKS
900 S FREMONT AVE 9TH FL
ALHAMBRA, CA 91803-1331

Mul h. Oslem

Owner's Designation of Well

NO 33

State Well Number

Parcel Number

07N/12W-27 S

DEADLINE: Notices must be received no later than August 31, 2006 in order to be recorded.

REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

If the above information is inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the coming year.

4	TYPE OF DOVEROION Comme	water autocation	-7			
1. 2.	TYPE OF DIVERSION Ground OWNERSHIP. Person listed be	water extraction or Surface diven	sion			
Z.						
	•	nt of diversion is located, and is extracti	- •			
		int of diversion is located, and is extract	ang/diverting water.		125	(acre-feet
	Owner of land, but lessee is extrac	ting/diverting water.		<u> </u>	1 -	<u>cubic-feet</u>
	Other: Please explain:			(Must	be a specific number)	gallons
3.		EXTRACTED DURING CALENDA!				
1 .		R DIVERTED DURING CALENDAR	•			acre-feet
5.	METHOD OF MEASUREMENT	Water Mater Power Meter	Nonmetered or Estimated	ł		cubic-feet
Š.	TYPE OF WATER USE	Agricultural Domestic or Municipal	Other:	Annual quar	ıtity	gallons
,	ACTION REQUESTED (Check o	nal:		Season of d	lversion	•
•	•	eopened at any time – fee required)			Begin End	
					te of diversion	
	Record my water use. (Fee req	-				
	-	keep my name on mailing list. (No fee	requirea)			
	Transfer this file to:	(NEW OWNER'S FIRST NAME)	(M. NAME)		() ACT MANEY	
	Company Name:	(MEN CAMERO LIKO I MAME)			(LAST NAME)	
			-			
	Address:					·
	Talanhanas ()	(MAILING ADDRESS)	*1	(CITY)	(STATE)	(ZIP CODE)
	Telephone: ()	Effective D	ate:			
:	SUPPLEMENTAL INFORMATION	L. Please list any changes in your project si	nce last voer/now numn nou	land imination r	ew method of Industion	oto) or any other comm
•		Canada ant any oranged (i) you project at	ino ion Jour (iion purit, iion	imia kuñadok i	es meado o magaron	erest on early other continue
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ı	CERTIFICATION AND SIGNATUR	2E: Learthy that the forming statement	te are true and correct to it	so had of much	nowledge.	

Printed Name	.1 Janto		M).	· release		
	FIRST NAME)	100	(M. AKAME)	(LÄST NAME		
Company Name:		MULUS	<u> </u>	1	<u> </u>	
THIS SPACE FOR OFFI	CE USE ONLY	0		R	AMT:	_
)		

PLEASE COMPLETE. SUBMIT THE OR LIAL AND MAKE A COPY FOR YOUR RECORDS State of California, State Water Resources Control Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000

G193109³G³2005

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

2005

if the owner information below is wrong or missing, please correct. OWNER(S) OF RECORD L A COUNTY WATERWORKS DIST NO 4:

RECORDATION NO.: G193109 CONTACT PHONE NO.: (626)458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING: L A COUNTY WATERWORKS DIST NO 4 DEPT OF PUBLIC WORKS 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well

NO 34

State Well Number

Parcel Number

07N/12W-27 S

DEADLINE: Notices must be received no later than August 31, 2006 in order to be recorded.

REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE If the above information is inaccurate, please line it out in red and provide current information. Notify this office if ownership or address ch

ЮΤ	iling year.	•	oundition in the same of the s			Coods desiring site
ſ.			ace diversion			
2	OWNERSHIP, Person listed be					
	Owner of land on which well or pole	nt of diversion is localed, and i	s extracting/diverting water.			
	<u>Lessee</u> of land on which well or po <u>Owner</u> of land, but <u>lessee</u> is extrac		302	acre-took		
	Other: Please explain:			(Must	be a specific number)	gallons
i. I.	AMOUNT OF GROUNDWATER I			→		
i.	METHOD OF MEASUREMENT	Water Meter Power Meter	Nonmetered or Estima	ated		acre-feet
i.	TYPE OF WATER USE	Agricultural Domestic or N	funicipal Other:	Value Andri	nifty	cubic-feet gallons
	ACTION REQUESTED (Check of	ne):		Season of di		
	Close this file. (Files may be reopened at any time – fee required) Record my water use. (Fee required)			1 6	Begin End	
				* Maximum rei	te of diversion	
	Do not record my water use but I Transfer this file to:		(No fee required)		· · · · ·	
	Company Name:	(NEW OWNER'S FIRST NAME)	(M. NAME)	- 	(LAST NAME)	
	Address:			•		
		(MAILING ADDRESS)		(CITY)	(STATE)	(ZIP CODE)
	Telephone: ()	된	ective Date:	··· — — — — — — — — — — — — — — — — — —	·	
	SUPPLEMENTAL INFORMATION	Please Set any changes in your	Perdant almos faut unan (nom anno	والمراجع المراجع المراجع		
		- 1 cose act only cate again at your	holox same nor last from brath	tone relic sufferoir is	ew memod of imgation,	esc.) or any other comm
		<u>`</u>		<u> </u>		

Signature: **Printed Name** (JL NAME) Company Name: THIS SPACE FOR OFFICE USE ONLY AMT: State of California, State Water Recourses Control Board, Division of Water Rights

P.O. BOX 2000, SACRAMENTO, CA 95812-2000 Info: (918) 341-5300, FAX: (918) 341-5409, Web: http://www.waterights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION *G1931603G32005*

2005

If the owner information below is wrong or missing, please correct.

OWNER(8) OF RECORD LACOUNTY WATERWORKS DIST NO 4;

RECORDATION NO.: 9183160 CONTACT PHONE NO.: (626)468-7157

PRIMARY CONTACT OR AGENT FOR MAR. A REPORTING.

L. A COUNTY WATERWORKS DIST NO 4

DEPT OF PUBLIC WORKS

900 S FREMONT AVE 9TH FL

ALHAMBRA, CA 91803-1331

Owner's Designation of Well

NO 38

State Well Number 07N/12W-09M S

Percel Number

DEADLINE: Notices must be received no later than August 31, 2008 in order to be recorded.

REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

if the above information is inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the corning year.

COL	ung year.					
1.	TYPE OF DIVERSION Grounds		sion		,	
2.	OWNERSHIP. Person listed be	fow la:				
	Owner of land on which well or pole	nt of diversion is focated, and is extract	ing/diverting water.			•
	Lessee of land on which well or po	int of diversion is located, and is extrac	fing/diverting water.	-10	10	
	Owner of land, but lessee is extrac	ting/diverting water.	•	14	17	(ficre-feet)
	Other: Please explain:			(Ment be a s	specific number)	canoner.
3.		EXTRACTED DURING CALENDA		L		
4.		NOVERTED DURING CALENDAR	YEAR			
5.	METHOD OF MEASUREMENT	Water Moter Power Meter	Nonmetered or Estimated			acra-feet
В.	TYPE OF WATER USE	Agricultural Domestic or Municipal	Other:	Annual quantity _		cubio-feet
,	ACTION DECLIPOTED (Ob sale of			Season of diversit		gallons
٠,	ACTION REQUESTED (Check of					<u> </u>
		ropened at any time – fee required)		End _ Maximum rate of d		 .
	Record my water use. (Fee requ			TAXABLI IBB OIL		
	Do not record my water use but !	keep my name on malfing list. (No fee	required)			
	Transfer this file to:	A STATE OF THE STA		<u> </u>		
	Company Name	(NEW OWNER'S FIRST NAME)	(M. NAME)	(L	AST NAME)	_
	Company Italia,		·			
	Address:	<u> </u>				
	T -lh 4	(MAILING ADDRESS)	<u> </u>	(CITY)	(STATE)	(ZIP CODE)
	Telephone: ()	Effective D	ate:			

8. SUPPLEMENTAL INFORMATION. Please ist any changes in your project strice test year (new pump, new lend irrigation, new method of irrigation, etc.) or any other come.

9. CERTIFICATION AND SIGNATURE: I certify that the forgoing statements are true and correct to the best of my knowledge.

Signature:

Date

ON NAME

(LAST NAME)

THES SPACE FOR OFFICE USE ONLY

R. ANT:

PLEASE COMPLETE. SUBMIT THE O: JAL AND MAKE A COPY FOR YOUR RECORDS State of California, State Water Resources Control Board, Division of Water Rights

P.O. BOX 2000, SACRAMENTO, CA 95812-2000 Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION *G1931613G32005*

2005

If the owner information below is wrong or missing, please correct. OWNER(S) OF RECORD L A COUNTY WATERWORKS DIST NO 4:

> RECORDATION NO.: G193161 CONTACT PHONE NO.: (626)458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING: L A COUNTY WATERWORKS DIST NO 4 DEPT OF PUBLIC WORKS 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well

NO 37

State Well Number 07N/12W-30B S

Parcel Number

DEADLINE: Notices must be received no later than August 31, 2006 in order to be recorded. REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash,

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

coming year.

If the above information is inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the TYPE OF DIVERSION Groundwater extraction or 1. Surface diversion OWNERSHIP. Person listed below is: Owner of fand on which well or point of diversion is located, and is extracting/diverting water. Lessee of land on which well or point of diversion is located, and is extracting/diverting water. 258 acre-leet Owner of land, but lessee is extracting/diverting water. cubic-feet Other: Please explain: (Must be a specific number) gallons AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR 5. METHOD OF MEASUREMENT Water Meter acre-feet Power Meter Nonmetered or Estimated cubic-feet TYPE OF WATER USE Agricultural Domestic or Municipal Annual quantity gallons Season of diversion ACTION REQUESTED (Check one): 7. Beain Close this file. (Files may be reopened at any time - fee required) End Maximum rata of diversion Record my water use. (Fee required) Do not record my water use but keep my name on mailing list. (No fee required) Transfer this file to: _ (NEW OWNER'S FIRST NAME) (M. NAME) (LAST NAME) Company Name: _ Address: (MAILING ADDRESS) (CITY) (STATE) (ZIP CODE) Telephone: ()_ Effective Date: SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new land imigation, new method of imigation, etc.) or any other comments

CERTIFICATION. I certify that the forgoing statements are true and correct to the best of my knowledge. Signature: Printed Name

Company Name: THIS SPACE FOR OFFICE USE ONLY

PLEASE COMPLETE. SUBMIT THE OK __.IAL AND MAKE A COPY FOR YOUR RECORDS State of California, State Water Resources Control Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION 'G193249³G³2005*

2005

If the owner information below is wrong or missing, please correct. OWNER(S) OF RECORD L A COUNTY WATERWORKS DIST NO 4;

RECORDATION NO.: G193249 CONTACT PHONE NO.: (626)458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING. L A COUNTY WATERWORKS DIST NO 4 DEPT OF PUBLIC WORKS 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well

State Well Number

Parcel Number

43

07N/12W-27F01 S

DEADLINE: Notices must be received no later than August 31, 2006 in order to be recorded.

REQUIRED FEES: A filling fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

coming year.

If the above information is inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the TYPE OF DIVERSION Groundwater extraction or 1. Surface diversion OWNERSHIP. Person listed below is: Owner of land on which well or point of diversion is located, and is extracting/diverting water. Lessee of land on which well or point of diversion is located, and is extracting/diverting water. acre-feet 723 Owner of land, but lessee is extracting/diverting water. Other: Please explain: (Must be a specific number) gallons AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR 5. METHOD OF MEASUREMENT acre-feet · Water Meter Power Meter Nonmetered or Estimated cubic-feet TYPE OF WATER USE Agricultural Domestic or Municipal · Other: Annual quantity gallons Season of diversion 7. ACTION REQUESTED (Check one): Bealn Close this file. (Files may be reopened at any time - fee required) End Maximum rate of diversion Record my water use. (Fee required) Do not record my water use but keep my name on mailing list. (No fee required) Transfer this file to: _ (NEW OWNER'S FIRST NAME) (M. NAME) (LAST NAME) Company Name: Address: (MAILING ADDRESS) (CITY) (STATE) (ZIP CODE) Telephone: () Effective Date:

SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new land imigation, new method of irrigation, etc.) or any other comments AND SENATURE: I certify at the forgoing statements are true and correct to the best of my knowledge. Signature: Printed Name Company Name: THIS SPACE FOR OFFICE USE ONLY AMT:

PLEASE COMPLETE. SUBMIT THE O. JAL AND MAKE A COPY FOR YOUR RECORDS
State of California, State Water Resources Control Board, Division of Water Rights
P.O. BOX 2000, SACRAMENTO, CA 95812-2000

G1932013G32005

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

2005

If the owner information below is wrong or missing, please correct.

OWNER(S) OF RECORD LACOUNTY WATERWORKS DIST NO 4:

RECORDATION NO.: G193201 CONTACT PHONE NO.: (626)458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING:

L A COUNTY WATERWORKS DIST NO 4

DEPT OF PUBLIC WORKS

900 S FREMONT AVE 9TH FL

ALHAMBRA, CA 91803-1331

Owner's Designation of Well WELL NO 41

Signature:

Printed Name

Company Name:

THIS SPACE FOR OFFICE USE ONLY

State Well Number 07N/10W-19E01 S Parcel Number

AMT:

DEADLINE: Notices must be received no later than August 31, 2006 in order to be recorded.

REQUIRED FEES: A filing fee of \$115,00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should Indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

If the above information is inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the coming year. TYPE OF DIVERSION Groundwater extraction or 1. Surface diversion OWNERSHIP. Person listed below is: Owner of land on which well or point of diversion is located, and is extracting/diverting water. Lessee of land on which well or point of diversion is located, and is extracting/diverting water. 40 acre-feet Owner of land, but lessee is extracting/diverting water. cubic-leet Other: Please explain: (Must be a specific number) callons AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR 5. METHOD OF MEASUREMENT acre-feet Water Meter Power Meter Nonmetered or Estimated cubic-feet 6. **TYPE OF WATER USE** Agricultural Domestic or Municipal Annual quantity gallons Season of diversion 7. ACTION REQUESTED (Check one): Begin_ Close this file. (Files may be reopened at any time - fee required) Fod Maximum rate of diversion Record my water use. (Fee required) Do not record my water use but keep my name on mailing list. (No fee required) Transfer this file to: __ (NEW OWNER'S FIRST NAME) (M. NAME) (LAST NAME) Company Name: Address: (MAILING ADDRESS) (CITY) (STATE) (ZIP CODE) Telephone: () Effective Date: SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new land imgation, new method of imgation, etc.) or any other comments That the forgoing statements are true and correct to the best of my knowledge.

PLEASE COMPLETE. SUBMIT THE OK. ALL AND MAKE A COPY FOR YOUR RECORDS
State of California, State Water Resources Control Board, Division of Water Rights

P.O. ROY 2000, SACRAMENTO, CA 95512, 2000

P.O. BOX 2000, SACRAMENTO, CA 95812-2000 Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION *G193162³G³2005*

2005

If the owner information below is wrong or missing, please correct.

OWNER(S) OF RECORD LACOUNTY WATERWORKS DIST NO 4;

RECORDATION NO.: G193162 CONTACT PHONE NO.: (626)458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING:

L A COUNTY WATERWORKS DIST NO 4

DEPT OF PUBLIC WORKS

900 S FREMONT AVE 9TH FL

ALHAMBRA, CA 91803-1331

Owner's Designation of Well

NO 38

State Well Number

07N/12W-21F S

Parcel Number

DEADLINE; Notices must be received no later than August 31, 2006 in order to be recorded.

REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

If the above information is inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the coming year.

Surface diversion

OWNERSHIP. Person listed below is:
Owner of land on which well or point of diversion is located, and is extracting/diverting water.
Lessee of land on which well or point of diversion is located, and is extracting/diverting water.
Owner of land, but lessee is extracting/diverting water.

5. METHOD OF MEASUREMENT Water Meter Power Meter Nonmetered or Estimated
6. TYPE OF WATER USE Agricultural Domestic or Municipal Other:

7. ACTION REQUESTED (Check one):

Company Name: _

Telephone: ()_

Close this file. (Files may be reopened at any time - fee required)

Record my water use. (Fee required)

Do not record my water use but keep my name on mailing list. (No fee required)

Transfer this file to:

TYPE OF DIVERSION Groundwater extraction or

(NEW OWNER'S FIRST NAME) (M. NAME)

Address: (MAILING ADDRESS)

MAILING ADDRESS)
_____ Effective Date:

(CITY)

(STATE)

(LAST NAME)

(Must be a specific number)

Annual quantity

Season of diversion

Begin

End _____ Maximum rate of diversion

(ZIP CODE)

acre-feet

gallons

acre-feet

cubic-feet

gallons

cubic-feet

SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new land infigation, new method of infigation, etc.) or any other comments

9. CERTIFICATION AND SIGNATURE: I certify that the forgoing statements are true and correct to the best of my knowledge.

Signature: Mulling Falling

_ Date

rellesen?

Company Name: ___

Printed Name _

THIS SPACE FOR OFFICE USE ONLY

R

AMT:_

PLEASE COMPLETE. SUBMIT THE OF AL AND MAKE A COPY FOR YOUR RECORDS
State of California, State Water Resources Control Board, Division of Water Rights

ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

P.O. BOX 2000, SACRAMENTO, CA 95812-2000 info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov

G1932803G32005

2005

If the owner information below is wrong or missing, please correct.

OWNER(S) OF RECORD LOS ANGELES COUNTY WATERWORKS;

RECORDATION NO.: G193280 CONTACT PHONE NO.: (626)458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING:
LOS ANGELES COUNTY WATERWORKS
DISTRICT NO 4
900 S FREMONT AVE 9TH FL
ALHAMBRA, CA 91803

Owner's Designation of Well

50

State Well Number 07N/12W-09A S Parcel Number

REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

If the above information is inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the coming year. TYPE OF DIVERSION Groundwater extraction or 1. Surface diversion OWNERSHIP. Person listed below is: Owner of land on which well or point of diversion is located, and is extracting/diverting water. Lessee of land on which well or point of diversion is located, and is extracting/diverting water. 720 Cacre-feet Owner of land, but lessee is extracting/diverting water. cubic-feet Other: Please explain: (Must be a specific number) gallons AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR acre-feet 5. **METHOD OF MEASUREMENT** Water Meter Power Meter Nonmetered or Estimated cubic-feet 6. TYPE OF WATER USE Agricultural Domestic or Municipal Other: Annual quantity gallons Season of diversion 7. ACTION REQUESTED (Check one): Begin Close this file. (Files may be reopened at any time - fee required) End Maximum rate of diversion. Record my water use. (Fee required) Do not record my water use but keep my name on mailing list. (No fee required) Transfer this file to: (NEW OWNER'S FIRST NAME) (M. NAME) (LAST NAME) Company Name: Address: (MAILING ADDRESS) (CITY) (STATE) (ZIP CODE) Effective Date: Telephone: ()_ SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new land irrigation, new method of irrigation, etc.) or any other comments

9. CERTIFICATION AND SIGNATURE CONTROL CERTIFICATION AND SIGNATURE COMPany Name:

Company Name:

THIS SPACE FOR OFFICE USE ONLY

CERTIFICATION AND SIGNATURE CONTROL CERTIFY that the forgoing statements are true and correct to the best of my knowledge.

Date

Company Name:

CERTIFICATION AND SIGNATURE CONTROL CERTIFY THAT IS A MATE TO THE CONTROL CERTIFY THAT IS A MATE TO THE CENTRAL CERTIFY THAT IS A MATE TO THE CENTRAL CERTIFY THAT IS A MATE TO THE CENTRAL CENT

PLEASE COMPLETE. SUBMIT THE OK. AL AND MAKE A COPY FOR YOUR RECORDS -State of California, State Water Resources Control Board, Division of Water Rights

P.O. BOX 2000, SACRAMENTO, CA 95812-2000 Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.walerrighte.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION *G1932503G32005*

2005

If the owner information below is wrong or missing, please correct.

OWNER(8) OF RECORD LACOUNTY WATERWORKS DIST NO 4;

RECORDATION NO.: G193250 CONTACT PHONE NO.: (628)458-7157

PRIMARY CONTACT OR AGENT FOR MAR, & REPORTING:

L. A COUNTY WATERWORKS DIST NO 4

DEPT OF PUBLIC WORKS

900 S FREMONT AVE 9TH FL

ALHAMBRA, CA 91803-1331

Owner's Designation of Well

State Well Number

Parcel Number

44

07N/12W-27F02 8

DEADLINE: Notices must be received no later than August 31, 2006 in order to be recorded.

REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

If the above information is inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the coming year.

1. 2.	TYPE OF DIVERSION Grounds OWNERSHIP. Person listed be	water extraction or low to:	Surface diver	sion			
	Owner of land on which well or pol-	nt of diversion is locate	d. and is extracti	no/diverting water.			
	Lessee of land on which well or po Owner of land, but jessee is extrac	Int of diversion is locate				633	acre-fact
	Other: Please explain:		<u> </u>		(Must b	e a specific number)	gallions
3.	AMOUNT OF GROUNDWATER						
4.	AMOUNT OF SURFACE WATER	DIVERTED DURIN	G CALENDAR	YEAR	ſ .	_	
5.	METHOD OF MEASUREMENT	Water Meter Pow	er Meter	Nonmetered or Estimated			ecre-feet
6.	TYPE OF WATER USE	•	selic or Municipal	Other:	Annual quarri Season of div	ity	cubic-feet gallons
7.	ACTION REQUESTED (Check of	ne):				egin	
	Close this file. (Files may be re	sopened at any time -	- fee required)) E	nd	f
	Record my water use. (Fee requ	uired)	- •	•	Maximum rate	of diversion	
	Do not record my water use but Transfer this file to:		ing list. (No fee	required)		•	
		(NEW OWNER'S FIRST		(M. NAME)		(LAST NAME)	
	Company Name:				<u> </u>	<u> </u>	<u>, ·</u>
	Address:						
		(MAILING ADDR	ESS)		(CITY)	(STATE)	(ZIP CODE)
	Telephone: ()		Effective D	ete:			<u> </u>

9. CERTIFICATION AI	ND SIGNATURE: I gertify that the	forgoing statements are true and co	prect to the best	of my knowledge.	•
Signature: Way	Whi Oblin		_Date	8/22/96	
Printed Name	David	<u> </u>		Decler	zen)
Company Name:	TOP MIN	des Count	X_	(LAST NAME	
TH 解系统 FOR OFFICE U	SE ONLY			R	ART:
		•	\bigcirc		·

*PLEASE COMPLETE. SUBMIT THE ON. __ VAL AND MAKE A COPY FOR YOUR RECORDS*** _ State of California, State Water Resources Control Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION *G193281³G³2005*

2005

if the owner information below is wrong or missing, please correct. OWNER(8) OF RECORD LOS ANGELES COUNTY WATERWORKS:

> RECORDATION NO.: G193281 CONTACT PHONE NO.: (628)488-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING: LOS ANGELES COUNTY WATERWORKS DISTRICT NO 4 900 8 FREMONT AVE 9TH FL ALHAMBRA, CA 91803

Owner's Designation of Well

4-51

State Well Number 07N/12W-09C S

Percel Number

DEADLINE: Notices must be received no later than August 31, 2006 in order to be recorded.

REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash,

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

coming year.

If the above information is inaccurate, please line it out in red and provide current information. Notify this office it ownership or address changes occur during the TYPE OF DIVERSION Groundwater extraction or Surface diversion .OWNERSHIP. Person listed below is: Owner of land on which well or point of diversion is located, and is extracting/diverting water. Lesses of land on which well or point of diversion is located, and is extracting/diverting water. 1649 вленен. Owner of land, but lessee is extracting/diverting water. cubic-feet Other: Please explain: (Must be a specific number) gallons AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR 5. METHOD OF MEASUREMENT scre-feet Water Motor Power Meter Nonmelared or Estimated cubic-feet TYPE OF WATER USE 6. Agricultural Domestic or Municipel Other Annual quentity callons Season of diversion ACTION REQUESTED (Check one): 7. Begin Close this file. (Files may be reopened at any time - fee required) Επď. notineum rate of diversion Record my water use. (Fee required) Do not record my water use but keep my name on mailing list. (No fee required) Transfer this file to: (NEW OWNER'S FIRST NAME) (M. NAME) (LAST NAME) Company Name: __ Address: (CITY) (STATE) (ZIP CODE) Telephone: ()_ Effective Date: SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new land imigation, new method of imigation, etc.) or any other comments

I certify that the forgoing statements are true and correct to the best of my knowledge.

Signature:

Printed Name

Company Name: THIS SPACE FOR OFFICE USE ONL ***PLEASE COMPLETE. SUBMIT THE O:____IAL AND MAKE A COPY FOR YOUR RECORDS***
State of California, State Water Resources Control Board, Division of Water Rights

P.O. BOX 2000, SACRAMENTO, CA 95812-2000 info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION *G1932823G32005*

2005

If the owner information below is wrong or missing, please correct.

OWNER(S) OF RECORD LOS ANGELES COUNTY WATERWORKS:

RECORDATION NO.: G193282 CONTACT PHONE NO.: (626)458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING:
LOS ANGELES COUNTY WATERWORKS
DISTRICT NO 4
900 S FREMONT AVE 9TH FL
ALHAMBRA, CA 91803

Owner's Designation of Well

4-54

Company Name:

THIS SPACE FOR OFFICE USE ONLY

State Well Number 07N/11W-20K S

Parcel Number

DEADLINE: Notices must be received no later than August 31, 2006 in order to be recorded.

REQUIRED FEES: A filling fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

	PLEASE READ THE	GENERAL INFORMATION ON THE	REVERSE SIDE BEF	ORE COMPLETING THIS NO	TICE
lf th	e above information is inaccurate, plea	se line it out in red and provide current info	ormation. Notify this offic	e if ownership or address change	s occur during the
i. 2.	OWNERSHIP. Person listed be				-
	Owner of land on which well or poi	nt of diversion is located, and is extracting	diverting water.	,	
	Lessee of land on which well or po Owner of land, but lessee is extrace Other: Please explain:	Int of diversion is located, and is extracting ting/diverting water.	y/diverting water.	(Must be a specific number)	acre-feet cubic-feet
). -	AMOUNT OF GROUNDWATER I	EXTRACTED DURING CALENDAR Y		(Most on a specific Harrings)	galions
j. j.	METHOD OF MEASUREMENT TYPE OF WATER USE	Agricultural Domestic or Municipal	Nonmetered or Estimated Other:	Annual quantity	acre-feet cubic-feet gallons
•	Record my water use. (Fee requ	eopened at any time – fee required) pired)		BeginEnd	
	Transfer this file to:	кеер my name on mailing list. (No fee req	<u> </u>		
	Company Name:	(NEW OWNER'S FIRST NAME)	(M. NAME)	(LAST NAME)	
	Address:				
	Telephone: ()	(MAILING ADDRESS) Effective Date	÷	(CITY) (STATE)	(ZIP CODE)
	SUPPLEMENTAL INFORMATION	Please list any changes In your project since	last year (new pump, new i	and Imgation, new method of imgation	ı, etc.) or any other comme
	# 12. SII / A	I certify that the forgoing statements a			
an	ature:	ellem	Date	OK/22/015	
9	mure.		Date		

PLEASE COMPLETE. SUBMIT THE OK AL AND MAKE A COPY FOR YOUR RECORDS State of California, State Water Resources Control Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2090

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION G1932833G32005*

2005

if the owner information below is wrong or missing, please correct. OWNER(8) OF RECORD LOS ANGELES COUNTY WATERWORKS;

> RECORDATION NO.: 0193283 CONTACT PHONE NO.: (628)458-7167

FRIMARY CONTACT OR AGENT FOR MAIL & REPORTING: LOS ANGELES COUNTY WATERWORKS DISTRICT NO 4 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803

Owner's Designation of Well

4-55

State Well Number

Percel Number

07N/11W-20K S

DEADLINE: Notices must be received no later than August 31, 2006 in order to be recorded.

REQUIRED FEES: A fitting fee of \$115,00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

<u>Please re</u>	AD THE GENERAL INFORMATION ON	THE REVERSE SIDE BE	FORE COMPLET	THE THE NO	TICE
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CURTING YEAD.				SOCIOS GIALIGO	o coccai during day
 TYPE OF DIVERSION OWNERSHIP. Person II 	Groundwater extraction or Surface di isted below is:	version			
Owner of land on which w	rell or point of diversion is located, and is extra	acting/divertion water			
Lesses of land on which a	well or point of diversion is located, and is extr	raction/diverting water			
Owner of land, but lessee	is extracting/diverting water.	emigrationing sector.	1 15	52	acre-feet
Other: Please explain:	a sales granding need,		[<u></u>	<u> </u>	cubic feet
	VATER EXTRACTED DURING CALEND	NAR VEAD	(MILECOE 8	specific number)	galliona
4. AMOUNT OF SURFACE	WATER DIVERTED DURING CALEND,	AR VEAR		•	<u> </u>
5. METHOD OF MEASURE	MENT Weter Meter Power Meter	=			acre-feet
6. TYPE OF WATER USE		Nonmetered or Estimated			cubic-feet
Z G. MAI EN GGE	Agricultural Domestic or Municip	el Other:			
7. ACTION REQUESTED (C	heck one):		Season of divers		-
	may be reopened at any fime – fee required	А	Segi End	п	
Record my water use.		",		diversion	,
No. of the second					:
Transfer title file to:	goe box week my manie on mannights: (NO)	ae required)			
Tradition this life to.	(NEW OWNER'S FIRST NAME)	(M. NAME)		LAST NAME)	
Company Name;	((at 14.4MT)	Ų	DVOI INNINET	
					
 _	(MAILING ADDRESS)	 -	(CITY)	(STATE)	(ZIP CODE)
Telephone: ()	Effective	e Date:		(01/112)	(22 0000)
					
. SUPPLEMENTAL INFOR	MATION. Please list any changes in your projec	t since last year (new pump, new	viland infgation, new r	nethod of infigation.	etc.) or any other commer
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			···		
. CERTIFICATION AND SIG	NATURE: cartify that the forgoing statem	ents are true and correct to \$	he best of my know	ledce.	
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ignature:	ti valla	Date _	10/12/0	6	
rinted Name ()	<u> </u>	<u> </u>	Ped	erce	<u> </u>
\ \ (STANKE) PALANDO		(LAST NA	ME	
ompany Name: 📈		<u> </u>			

PLEASE COMPLETE. SUBMIT THE OK. LIAL AND MAKE A COPY FOR YOUR RECORDS State of California, State Water Resources Control Board, Division of Water Rights

P.O. BOX 2000, SACRAMENTO, CA 95812-2000

Info: (916) 341-5390, FAX: (916) 341-5400, Web: http://www.wetenights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION *G193284³G³2005*

2005

If the owner information below is wrong or missing, please correct. OWNER(S) OF RECORD LOS ANGELES COUNTY WATERWORKS;

> RECORDATION NO.: G183284 CONTACT PHONE NO.: (828)458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING: LOS ANGELES COUNTY WATERWORKS DISTRICT NO 4 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803

Owner's Designation of Well

4-58

Signature:

Printed Name

Company Name:

THIS SPACE FOR OFFICE USE ONLY

State Well Number

Percel Number

AMT:

07N/11W-18R S

DEADLINE: Notices must be received no later than August 31, 2006 in order to be recorded.

REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash,

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

If the above information is inaccurate, please line it out in red and provide current information. Notity this office if ownership or address changes occur during the

	<u>sesse</u> of hand on which well or po <u>wner</u> of hand, but <u>lesses</u> is extre			ing/diverting water.	13	94	ecre-feet
	ther: Please explain:				(Must be a s	pecific number)	gallons
. AMK	OUNT OF GROUNDWATER	EXTRACTED D	URING CALENDA	RYEAR		<u> </u>	
. AMO	DUNT OF SURFACE WATE	R DIVERTED DI	JRING CALENDAR	YEAR		·	
. MET	THOD OF MEASUREMENT	Water Meter	Power Meter	Nonmetered or Estimated			acre-feet
. TYP	E OF WATER USE	Agricuitura!	Domesõc or Municipal	Other:	Annual quantity		cubic-feet delions
	UALI DEALIEATED (A		•		Sesson of diversio	n	ganta
. ACT	'ION REQUESTED (Check o						
	Close this file. (Files may be a		ime fee required)		End _ Mandatum rate of d	hanzelon	
•	Record my water use. (Fee req	•		•	CARTOLICA II 1889 CI O	IAR BOLL	,
	Do not record my water use but		n malting list. (No fee	required)			
	Transfer this file to:			<u></u>			
	0N	(NEW OWNER'S I		(M. NAME)	(LA	IST NAME)	
	Company Name:			· · · · · · · · · · · · · · · · · · ·		· -···	<u></u> -
	Address:					·	
		(MALING)	ADDRESS)		(СПУ)	(STATE)	(ZIP CODE)
	Telephone: ()		Effective D	ate:		· ·	· ,
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Date

PLEASE COMPLETE. SUBMIT THE OK. AL AND MAKE A COPY FOR YOUR RECORDS State of California, State Water Resources Control Board, Division of Water Rights

P.O. BOX 2000, SACRAMENTO, CA 95812-2000 info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION G193285³G³2005*

2005

If the owner information below is wrong or missing, please correct. OWNER(S) OF RECORD LOS ANGELES COUNTY WATERWORKS:

> RECORDATION NO.: G193285 CONTACT PHONE NO.: (626)458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING: LOS ANGELES COUNTY WATERWORKS DISTRICT NO 4 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803

Owner's Designation of Well

4-59

THIS SPACE FOR OFFICE USE ONLY

State Well Number 07N/11W-18R S

Parcel Number

AMT:

 DEADLINE: Notices must be received no later than August 31, 2006 in order to be recorded. REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

If the above information is inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the coming year.

TYPE OF DIVERSION 1. Groundwater extraction or Surface diversion OWNERSHIP. Person listed below is: Owner of land on which well or point of diversion is located, and is extracting/diverting water. Lessee of land on which well or point of diversion is located, and is extracting/diverting water. acfe-feet Owner of land, but lessee is extracting/diverting water. cubic-feet Other: Please explain: (Must be a specific number) gallons AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR 5. METHOD OF MEASUREMENT Water Meter acre-feet Power Meter Nonmetered or Estimated TYPE OF WATER USE cubic-feet Agricultural Domestic or Municipal Other: Annual quantity gallons Season of diversion **ACTION REQUESTED (Check one):** 7. Begin Close this file. (Files may be reopened at any time - fee required) End. Maximum rate of diversion Record my water use. (Fee required) Do not record my water use but keep my name on mailing list. (No fee required) Transfer this file to: ____ (NEW OWNER'S FIRST NAME) (M. NAME) (LAST NAME) Company Name: Address: (MAILING ADDRESS) (CITY) (STATE) (ZIP CODE) Telephone: () Effective Date: SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new land Infigation, new method of irrigation, etc.) or any other comments

I certify that the forgoing statements are true and correct to the best of my knowledge. Signature: Printed Name (M. NAME) Company Name:

PLEASE COMPLETE. SUBMIT THE OK. JAL AND MAKE A COPY FOR YOUR RECORDS State of California, State Water Resources Control Board, Division of Water Rights

ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

P.O. BOX 2000, SACRAMENTO, CA 95812-2008 Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov *G193397³G³2005*

2005

If the owner information below is wrong or missing, please correct. OWNER(S) OF RECORD LA COUNTY WATERWORKS DIST NO 4:

> RECORDATION NO.: G193397 CONTACT PHONE NO.: (626)458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING: L A COUNTY WATERWORKS DIST NO 4 DEPT OF PUBLIC WORKS 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well

60

State Well Number

Parcel Number

07N/12W-17F02 \$

3153-015-953

DEADLINE: Notices must be received no later than August 31, 2006 in order to be recorded.

REQUIRED FEES: A filling fee of \$115.90 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

If the above information is inaccurate, please line it out in red and provide current information. Notify this office if cwnership or address changes occur during the coming year.

TYPE OF DIVERSION Groundwater extraction or Surface diversion

Telephone: ()

THIS SPACE FOR OFFICE USE ONLY

OWNERSHIP. Person listed below is: Owner of land on which well or point of diversion is located, and is extracting/diverting water. Lessee of land on which well or point of diversion is located, and is extracting/diverting water. 1099 cre-feet Owner of land, but lessee is extracting/diverting water. cubic-feet Other: Please explain: (Must be a specific number) gallons AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR acre-feet 5. METHOD OF MEASUREMENT Water Meter **Power Meter** Nonmetered or Estimated cubic-feet **TYPE OF WATER USE** 6. Agricultural Domestic or Municipal Other: Annual quantity galions Season of diversion ACTION REQUESTED (Check one): 7. Begin, Close this file. (Files may be reopened at any time - fee required) Fnd Maximum rate of diversion Record my water use. (Fee required) Do not record my water use but keep my name on mailing list. (No fee required) Transfer this file to: _ (NEW OWNER'S FIRST NAME) (M. NAME) (LAST NAME) Company Name: Address: (MAILING ADDRESS) (CITY) (STATE) (ZIP CODE)

SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new land irrigation, new method of irrigation, etc.) or any other comments 1 contify that the forgoing statements are true and correct to the best of my knowledge. Signature: **Printed Name** (M. NĂME) Company Name:

Effective Date:

Complete a separate notice for each well.

State of California State Water Resources Control Board

Recordation Number

State Well Number

(Division of Water Rights Use Only)

DIVISION OF WATER RIGHTS

P.O. Box 2000, Sacramento, CA 95812-2000 Info: (916) 341-5300, FAX: (916) 341-5300, Web: http://www.waterrights.ca.gov

FIRST NOTICE GROUNDWATER DIVERSION

(Pursuant to Part 5, Division 2 of the Water Code)

1.	Name of person owning the well Los Angeles County Was (Unless otherwise indicated, annual notices will be sent to this name and address)	terworks Dis	trict	No. 40
	Address 900 S. Fremont Avenue	Alhambra	CA	91803
	Street address or P.O. Box number	City	State	Zip Code
	Telephone Number (646) 300 - 3306			
2.	Name of person extracting groundwater (if different than Item 1)		,	
	Address			
	AddressStreet address or P.O. Box number	City	State	Zip Code
	Telephone Number ()			
	WELL LOCATION			
3.	Owner's designation of well 4-6 4. County_	Los Angeles		
	County Assessor's Parcel Number 3123 001 901			
5.	Describe location of well to the nearest 40-acre quarter section. State well		1N12W	210.0065
••	State were	number (if known) v		
	N 14, of NW 14, Section 21	_, Township7 N		
	Range 12 W ,	s. & M.		
7.	Indicate location of well in the section grid below, or provide a copy of the	USGS quadrangle map v	vith the we	ll location
	marked. The place of use should also be indicated. The grid represents or			
	Section 2 , Township 7N , Rang	e		
	Quadrangle map name	· · · · · · · · · · · · · · · · · · ·		
				
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WATER USE

Calculate Annual extractions in sere-feet Order Copps served Copps serv	EXTRACT	ONS	L		USE		
or of estable (specify unit) 20 05 307 New Met Copestry with (specify products manufactured, number and his of stock watered of specify products manufactured, number and his of stock water of stock watered of stock water water in this notice is a misdemeanor pursuant to Section 5008 of the Water Code. **Supplied** **Decimient** **Quantification** **Archage products manufactured, number and his of stock watered of stock watered of stock water water in this notice is a misdemeanor pursuant to Section 5008 of the Water Code. **Supplied** **Quantification** Calendar		When use	is for irrigation				
Do you also divert surface water? No Yes or No Yes or No	or (specify unit)	or of estimate	Crops served			ranufactured, numbe	
Another water source? Yes or No WELL DATA WELL DATA		flow meter			М		
If answer (to 10 above) is yes, how are you reporting surface water use? a. Under Statement of Water Diversion and Use procedures	Do you also divert surface water?	Νo					
a. Under Statement of Water Diversion and Use procedures b. Under Amnual Recordation Notice procedures c. Under Appropriative Water Right procedures d. Not reporting WELL DATA WELL DATA WELL DATA Is the place of use also served by another well? Yes or No Pump tests Edison Conducted by Power supply Date 18. Casing diameter 16. Date installed 18. Casing diameter 19. Date installed 19. Date insta	· ·	Yes or No	-				
b. Under Annual Recordation Notice procedures							
c. Under Appropriative Water Right procedures							
WELL DATA WELL DATA Is the place of use also served by another well? Yes Another water source? Yes If yes to either, describe the District is served by multiple wells and imported State black. Type, make and horsepower of pump 100 Hp Date installed 2.005 Pump tests Edison 2.005 965% Power supply Power supply Fdison 5 Source Attention of the feet. 18. Casing diameter 16 Date installed 19. Supply Sea or No. What are the upper and lower depths of casing perforations? Upper 316 Lower 620 Is log of well available? Yes or No. Where? filed with Show feet from ground surface) Has a chemical analysis of well water been made? Yes If yes, where can it be obtained? DHS Are water level measurements available? Yes or No. Where? firm the District EASE NOTE THAT: WELL DATA Well's Multiple wells on dismoster of the water source? Yes or No. Where? firm the District EASE NOTE THAT: Where Power supply Many are true and correct to the best of my knowledge and belief. Name David Pedersen Signature David Englineer Date M/22/black		-					
WELL DATA Is the place of use also served by another well? Yes Yes qr No Yes qr N							
If yes to either, describe the District is served by another well? If yes to either, describe the District is served by multiple wells and imported state lake. Type, make and horsepower of pump 100 Hp Date installed 2005 water Type, make and horsepower of pump 200 Hp Date installed 2005 water Pump tests Edison, 2005 956 956 9566 Power supply Power supply Patison 344-13365 2005 Depth of well 600 feet. 18. Casing diameter 16 Date installed included by Yes or No What are the upper and lower depths of casing perforations? Upper 316 Lower 620 Is log of well available? Yes or No Has a chemical analysis of well water been made? Yes or No Are water level measurements available? Yes or No Are water level measurements available? Yes or No EASE NOTE THAT: willful misstatement in this notice is a misdemeanor pursuant to Section 5008 of the Water Code. Tecrifity that the foregoing required statements and the following optional additional statements, if any, are true and correct to the best of my knowledge and belief. Name David Pedevisen Signature David Propers Date 1982/166	d. Not reporting.				C]	
If yes to either, describe the District is served by mother well? If yes to either, describe the District is served by multiple wells and imported state lake. Type, make and horsepower of pump 100 Hp Date installed 2005 water Type, make and horsepower of pump 200 Hp Date installed 2005 water Type, make and horsepower of pump 100 Hp Date installed 2005 water Type, make and horsepower of pump 100 Hp Date installed 2005 water Pump tests Edison, 2005 956 956 9566 Power supply Patison Date 2005 Meter No. Meter No. Meter No. Date installed included included included by Yes or No What are the upper and lower depths of casing perforations? Upper 316 Lower 620 Is log of well available? Yes or No Has a chemical analysis of well water been made? Yes or No Has a chemical analysis of well water been made? Yes or No Are water level measurements available? Yes or No Are water level measurements available? Yes or No Where? If yes, where can it be obtained? DHS EASE NOTE THAT: willful misstatement in this notice is a misdemeanor pursuant to Section 5008 of the Water Code. It certify that the foregoing required statements and the following optional additional statements, if any, are true and correct to the best of my knowledge and belief. Name David Pedevisen Signature Math Welliam Papineer Date Maj22/06		WEL	L DATA	•			
If yes to either, describe the District is served by multiple wells and imported 5the lake. Type, make and horsepower of pump 100 Hp Date installed 2005 wate. Pump tests Edison 2005 966 65%. Pump tests Edison 349-13365 2005 Depth of well 660 feet. 18. Casing diameter 16 Date installed included by Yes or No. What are the upper and lower depths of casing perforations? Upper 316 Lower 620 Is log of well available? Yes or No. Has a chemical analysis of well water been made? Yes or No. Are water level measurements available? Yes or No. Are water level measurements available? Yes or No. Are water level measurements available? Yes or No. It where? If yes, where can it be obtained? DHS Are water level measurements available? Yes or No. Where? If yes, where can it be obtained? DHS Are water level measurements available? Yes or No. Where? If yes, where can it be obtained? DHS Are water level measurements available? Yes Where? If yes, where can it be obtained? DHS Are water level measurements available? Yes where? If yes, where can it be obtained? DHS Are water level measurements available? Yes Where? If yes, where can it be obtained? DHS Are water level measurements available? Yes Where? If yes, where can it be obtained? DHS Are water level measurements available? Yes Where? If yes, where can it be obtained? DHS Are water level measurements available? Yes Where? If yes, where can it be obtained? DHS Are water level measurements available? Yes or No Where? If yes, where can it be obtained? DHS Are water level measurements available? Yes or No Where? If yes, where can it be obtained? DHS Are water level measurements available? Yes or No Where? If yes, where can it be obtained? DHS Are water level measurements available? Yes or No Where? If yes, where can it be obtained? DHS Are water level measurements available? Yes or No Where? If yes, where can it be obtained? DHS Are water level measurements available? DHS Are water level measurements available? DHS Are water level measurements availab			2 211111			Vac	
If yes to either, describe the District is served by multiple wells and imported State lake. Type, make and horsepower of pump 100 Hp Date installed 2005 wate. Pump tests Edison, Zoof 966 65%. Pump tests Edison, Zoof 966 65%. Power supply Edison 349-1365 Zoof Date 349-1365 Zoof Depth of well 600 feet. 18. Casing diameter 16 Date installed incl. Is well gravel-packed? Yes 20. Date drilled 4/2002 Is log of well available? Yes or No Where? filed with DWP. If yes or No Has a chemical analysis of well water been made? Yes If yes, where can it be obtained? DHS Are water level measurements available? Yes Where? fire where? fire District EASE NOTE THAT: willful misstatement in this notice is a misdemeanor pursuant to Section 5008 of the Water Code. Its.00 filling fee must accompany each notice. I certify that the foregoing required statements and the following optional additional statements, if any, are true and correct to the best of my knowledge and belief. Name David Pedevsen Signature Pallal W Delluw Date Mallal Dellum Date Mallal Del	_	75 35		_			
Type, make and horsepower of pump 100 Hp Date installed 2005 Pump tests Edison, 2005, 956, 65% Power supply Tdison, 349-13365, 2005 Depth of well 600 Source feet. 18. Casing diameter 16 Date installed included includ	If yes to either, describe the Dist	niet is servedib	y multiple	i wells	and imp	orted State	Meter
Pump tests Edison 2005 956 65% Power supply Edison 349 - 13365 Pump efficiency 2005 Depth of well 660 Feet. 18. Casing diameter 16 Date installed included inc					_ '		water
Power supply Fdison Source feet. 18. Casing diameter 10. Daver 18. Casing diameter 19. Caver 18. Casing diameter 10. Daver 18. Casing diameter 19. Caver 19.	·						
Power supply Fdison Source feet. 18. Casing diameter 16 Date installed incl Is well gravel-packed? Yes or No What are the upper and lower depths of casing perforations? Upper 3 16 Lower 620 Is log of well available? Yes or No Has a chemical analysis of well water been made? Yes or No Are water level measurements available? EASE NOTE THAT: willful misstatement in this notice is a misdemeanor pursuant to Section 5008 of the Water Code. I certify that the foregoing required statements and the following optional additional statements, if any, are true and correct to the best of my knowledge and belief. Name David Peder's en Signature Allel W Peder's en Date Meter No. 18. Casing diameter 16 Date installed incl Meter No. 18. Casing diameter 16 Now feet from ground surface) Show feet from ground surface) Where? Signature Meter No. 18. Casing diameter 16 Nower Source Meter No. 18. Casing diameter 16 Nower Source Meter No. 18. Casing diameter 16 Nower Source 18. Casing diameter 16 Nower Source 18. Casing diameter 16 Nower 19 Source 1	Pump tests Conducted by						
Depth of well 660 Source feet. 18. Casing diameter 16 Date installed incl Is well gravel-packed? Yes or No What are the upper and lower depths of casing perforations? Upper 3 6 Lower 620 Is log of well available? Yes or No Has a chemical analysis of well water been made? Yes or No Are water level measurements available? Yes or No Where? If yes, where can it be obtained? DHS Are water level measurements available? Yes Where? If yes, where can it be obtained? DHS EASE NOTE THAT: willful misstatement in this notice is a misdemeanor pursuant to Section 5008 of the Water Code. I certify that the foregoing required statements and the following optional additional statements, if any, are true and correct to the best of my knowledge and belief. Name David Pedersen Signature Date Officer Date Male Date Officer Date	Power supply Fdi		340	1 - (3365	•		
Is well gravel-packed? Yes or No What are the upper and lower depths of casing perforations? Upper 316 Lower 620 Is log of well available? Yes or No Has a chemical analysis of well water been made? Yes or No Are water level measurements available? Yes or No Where? If yes, where can it be obtained? DHS Yes or No Where? From the District EASE NOTE THAT: willful misstatement in this notice is a misdemeanor pursuant to Section 5008 of the Water Code. 115.00 filling fee must accompany each notice. I certify that the foregoing required statements and the following optional additional statements, if any, are true and correct to the best of my knowledge and belief. Name David Pedevsen Signature David Pedevsen Title Senior Civil Engineer Date 08/22/06		_			16	Date installed	<u> </u>
What are the upper and lower depths of casing perforations? Upper 316 Lower 620 Is log of well available? Yes or No Has a chemical analysis of well water been made? Yes or No Are water level measurements available? Yes or No EASE NOTE THAT: villful misstatement in this notice is a misdemeanor pursuant to Section 5008 of the Water Code. 115.00 filing fee must accompany each notice. I certify that the foregoing required statements and the following optional additional statements, if any, are true and correct to the best of my knowledge and belief. Name David Pedevsen Signature Date Dallum Title Senior Civil Engineer Date Date Dallum Title Senior Civil Engineer Date	Dopards wen	ICC.			,		_ inche
What are the upper and lower depths of casing perforations? Upper 316 Lower 620 Is log of well available? Yes or No Has a chemical analysis of well water been made? Yes or No Are water level measurements available? Yes or No Where? from the District EASE NOTE THAT: villful misstatement in this notice is a misdemeanor pursuant to Section 5008 of the Water Code. S115.00 filing fee must accompany each notice. I certify that the foregoing required statements and the following optional additional statements, if any, are true and correct to the best of my knowledge and belief. Name David Pedevsen Signature Date Dallum Title Senior Civil Engineer Date Date Dallum Date Date Dallum Date Date Date Date Date Date Date Date	Is well gravel-packed?		20. Dat	e drilled 4 _/	2002		
Is log of well available? Yes or No Has a chemical analysis of well water been made? Yes or No Are water level measurements available? EASE NOTE THAT: willful misstatement in this notice is a misdemeanor pursuant to Section 5008 of the Water Code. Silfs.00 filing fee must accompany each notice. I certify that the foregoing required statements and the following optional additional statements, if any, are true and correct to the best of my knowledge and belief. Name David Pedersen Signature Filed with purple with purpl	What are the upper and lower depths	of casing perforations?	Upper 2	316	Lower	620	•
Has a chemical analysis of well water been made? Yes or No Are water level measurements available? Yes or No Where? from the District EASE NOTE THAT: willful misstatement in this notice is a misdemeanor pursuant to Section 5008 of the Water Code. 6115.00 filing fee must accompany each notice. I certify that the foregoing required statements and the following optional additional statements, if any, are true and correct to the best of my knowledge and belief. Name David Pedevsen Signature Additional Statements Date Date Date Date Date Date Date Date	- 1					rface)	
Has a chemical analysis of well water been made? Yes or No Are water level measurements available? Yes or No Where? from the District EASE NOTE THAT: willful misstatement in this notice is a misdemeanor pursuant to Section 5008 of the Water Code. 6115.00 filing fee must accompany each notice. I certify that the foregoing required statements and the following optional additional statements, if any, are true and correct to the best of my knowledge and belief. Name David Pedersen Signature Allie Senior Civil Engineer Date 18/22/16	Yes or N	Where?	tiken maka	<u> </u>		- t -	
Are water level measurements available? Yes Where? from the District EASE NOTE THAT: willful misstatement in this notice is a misdemeanor pursuant to Section 5008 of the Water Code. 6115.00 filing fee must accompany each notice. I certify that the foregoing required statements and the following optional additional statements, if any, are true and correct to the best of my knowledge and belief. Name David Pedersen Signature Relief Wellium Title Senior Civil Engineer Date 19/22/166	Has a chemical analysis of well water	been made? Yes	If yes, v	where can it be	obtained? _	<u>DHS</u>	
EASE NOTE THAT: willful misstatement in this notice is a misdemeanor pursuant to Section 5008 of the Water Code. 1 certify that the foregoing required statements and the following optional additional statements, if any, are true and correct to the best of my knowledge and belief. Name David Pedersen Signature Philip Civil Engineer Date 08/22/06					κ.		
EASE NOTE THAT: villful misstatement in this notice is a misdemeanor pursuant to Section 5008 of the Water Code. S115.00 filing fee must accompany each notice. I certify that the foregoing required statements and the following optional additional statements, if any, are true and correct to the best of my knowledge and belief. Name David Pedersen Signature Pluis Wellium Title Senior Civil Engineer Date 08/22/06	Are water level measurements availab	ile? Yes	Where	? from th	ne Dist	net	•
villful misstatement in this notice is a misdemeanor pursuant to Section 5008 of the Water Code. 15.00 filing fee must accompany each notice. I certify that the foregoing required statements and the following optional additional statements, if any, are true and correct to the best of my knowledge and belief. Name David Pedevsen Signature Must Wellium Title Senior Civil Engineer Date M/22/06	EACE MATERIES OF LAND.			•			
I certify that the foregoing required statements and the following optional additional statements, if any, are true and correct to the best of my knowledge and belief. Name David Pedersen Signature Mull Wellum Title Senior Civil Engineer Date 08/27/06		ion in a maindanasan		44- 04 1	5000 - C /IL	TT 4 60 1	ı
I certify that the foregoing required statements and the following optional additional statements, if any, are true and correct to the best of my knowledge and belief. Name David Pedevsen Signature Philip Worldware Title Senior Civil Engineer Date 08/22/06	t 15 00 filing for must accome	ice is a misdemean	or pursuan	t to Section :	oung of th	e Water Cod	e.
and correct to the best of my knowledge and belief. Name David Pedersen Signature Political Delluce Title Senior Civil Engineer Date 08/22/06	115:00 thing fee must accomp	апу еасп попсе.					
Name David Pedersen Signature Paliel W Oelluw Title Senior Civil Engineer Date 08/22/06	I certify that the foregoing required	statements and the fo	llowing option	al additional s	tatements, i	f any, are true	
Signature <u>Parel W. Oelluw</u> Title <u>Senior Civil Engineer</u> Date <u>08/22/06</u>		_					
Title Senior Civil Engineer Date 08/22/06	Name David Yederse	no					
Date Don't	Signature <i>Political W. Ole</i>	ellur					
A11	Title Senior Civil E	ngineer Date	08/27	106		-	
ACICAL OF LOGIC AND	A11 1						
	At (City of P.O.) AINAW D	ra				<u></u>	

Complete a separate notice for each well.

State of California State Water Resources Control Board

Recordation Number

State Well Number

(Division of Water Rights Use Only)

DIVISION OF WATER RIGHTS

P.O. Box 2000, Sacramento, CA 95812-2000 Info: (916) 341-5300, FAX: (916) 341-5300, Web: http://www.waterrights.ca.gov

FIRST NOTICE GROUNDWATER DIVERSION

(Pursuant to Part 5, Division 2 of the Water Code)

Name of person	owning the well	Ins Amag	Apr 1	' I				
	ndicated, annual notic	es will be sent 4011	ie naroa ca	bunty	Wate	rworks D	istrict	No. 40
_	·			,		i .	Λ.	0' · M
Address <u>19</u>	OS. Frem	ont AVO	nve		<u>A</u> 1	hambra	<u> </u>	91803
	Street address	s or P.O. Box mumb	er			City	State	Zip Code
Telephone Num	iber (620) <u>200</u>	- 3306						
Name of person	extracting groun	dwater (if diffe	rent than	Item 1)_				·
Address				_		<u> </u>		
	Street address	or P.O. Box numb	er			City	State	Zip Code
Telephone Num	ber ()		·					
			WEL	L LOCA	TION			
Owner's designa	tion of well	4-63		4. Co	unty L	15 Angeles	· •	
County Assessor	r's Parcel Number	3126	908	904		<i>U</i>		
							N7412 (J 7	2H1095
Describe location	n of well to the ne	earest 40-acre q	uarter se	ction. St	ite well nu	mber (if known)_	VINILW L	
>E	_ ¼, of	<u> </u>	Section	27	· ,	Township	7N	
		12 W						
					T .	3.6		
	Kange _		_ '		В. &	: M.		
Indicate location	of well in the sec	tion grid below	, or prov	ide a con	v of the U	SGS quadranole r	nap with the w	ell location
marked. The pla	of well in the sec ce of use should a	tion grid below also be indicate	, or prov d. The g	ride a cop rid repres	y of the Usents one v	SGS quadrangle r		ell location
marked. The pla	of well in the sec ce of use should a	tion grid below also be indicate	, or prov d. The g	ride a cop rid repres	y of the Usents one v	SGS quadrangle r		ell location
Section	of well in the sec ce of use should a	ction grid below also be indicate , Township_	v, or prov d. The g	ride a cop rid repres	y of the Usents one v	SGS quadrangle r		ell location
Section	of well in the sec ce of use should a	ction grid below also be indicate , Township_	v, or prov d. The g	ride a cop rid repres	y of the Usents one v	SGS quadrangle r		ell location
Section	of well in the sec ce of use should a	ction grid below also be indicate , Township_	v, or prov d. The g	ride a cop rid repres	y of the Usents one v	SGS quadrangle r		ell location
Section	of well in the sec ce of use should a	ction grid below also be indicate , Township_	v, or prov d. The g	ride a cop rid repres	y of the Usents one v	SGS quadrangle r		ell location
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marked. The pla	of well in the sec ce of use should a	ction grid below also be indicate , Township_	v, or prov d. The g	ride a cop rid repres	y of the Usents one v	SGS quadrangle revhole section.		ell location
marked. The pla	of well in the sec ce of use should a	ction grid below also be indicate , Township_	v, or prov d. The g	ride a cop rid repres	y of the Usents one v	SGS quadrangle revhole section.		ell location

WATER USE

		- CSC (II SKEICH IS	required, please use grid und	er nem /)				
Quanti	ty and Use of	water extracted	and method used in det	ermining quan	tity for the las		/ear.	
		EXTRACT	ONS	1171	1- k	USE		
Calendar Year	01	tions in acre-feet	Method of measurement or of estimate (specify)	Crops served	is for irrigation Acreage Supplied	Nature	en use is other that and extent of use, is manufactured, n of stock wate	i.e. population, umber and kind
20	236		flow meter	 		<u></u>	M & I	100
	<u> </u>		No	<u> </u>		<u>-</u>		
. Do you	also divert si	urface water? _	Yes or No	_	•			
. If answ	er (to 10 abov	ve) is yes, how a	re you reporting surface	e water use?				
	a,		ent of Water Diversion		lures		□	
	ь.		Recordation Notice pro					
	c,		riative Water Right pro					
	d.							
		riot roporang.	***************************************	******************	***************************************			
			WEL	L DATA				
Is the p	lace of use als	so served by and	ther well? Yes or No		_ Another wa	iter source?	Yes Ver or No	<u> </u>
If yes to	either, descr	ibe the Distri	ct is served by	multiple ut	lls and im	ported	State Whiter	Project w
			75 Hp	Da	te installed	2005	<u> </u>	
Pump te	_{ests} <u>Edi</u>	50n ducted by	. June 200	5,	418	,	57%	
Power s	Con unniv	Ed Ison	Date	E	ischarge rate gpm	1	Pump effici 2005	ency
		<u></u>	e	Met	er No.		Date installe	
	f well		feet.	18. Cas	ing diameter_	16		inche
Is well g	gravel-packed	7_Yes		20. Dat	e drilled	5/2002		
		Y es or No	of casing perforations?			Lowe	705	
Te log of	rurall availabi	bes Yes	370	-Clad wi	the Sure		··	
10 ROI 91	. Well avallagi	Yes or N	Where?	THEA W	W. DWA			
Has a ch	emical analys	sis of well water	been made? YES Yes or N	If yes, v	where can it be	e obtained?	<u> </u>	-
Are water	er level meast	rements availat	le? <u>YES</u>	Where	? trom	the O	ristrict	
EASE	NOTE TH	AT.						
			ice is a misdemean	OF BURGUON	t ta Sastian		4h o 337 o 4 4	7.4.
115.00	filing fee r	nust accomn	any each notice.	or pursuan	t to Section	1 2000 01	me water (Joue.
					•			
I certify	that the fore	going required	statements and the fo	liowing option	ial additional	statement	s, if any, are t	rae
ana cori	- (edge and belief.					
Name _	David	Pedersen	<u> </u>					
Signatur	re <i>Hay</i>	11110	llu					
Title	ENIOR	CIVIL EN	HNEEP Dat	e <i>08/22</i>	106	_		
		Alhambro			<u> </u>			
Firm or		1	les County					

Complete a separate notice for each well.

State of California State Water Resources Control Board

Recordation Number

State Well Number

(Division of Water Rights Use Only)

DIVISION OF WATER RIGHTS

P.O. Box 2000, Sacramento, CA 95812-2000 Info: (916) 341-5300, FAX: (916) 341-5300, Web: http://www.waterrights.ca.gov

FIRST NOTICE **GROUNDWATER DIVERSION**

(Pursuant to Part 5, Division 2 of the Water Code)

1.	Name of person owning the well LOS Angeles County Waterworks District No. 40 (Unless otherwise indicated, annual notices will be sent to this name and address) Address 900 S. Frement Avenue Ahambra CA 91803 Street address or P.O. Box number City. State Zip Code
	(Unless otherwise indicated, annual notices will be sent to this name and address)
	Address 900 S. Frement Avenue Alhambra CA 91803
	Street address or P.O. Box number City. State Zip Code
	Telephone Number (616) 200 - 3300
2.	Name of person extracting groundwater (if different than Item 1)
	Address Street address or P.O. Box number City State Zip Code
	Street address or P.O. Box number City State Zip Code
	Telephone Number ()
	WELL LOCATION
3.	Owner's designation of well 4-64 4. County LOS ANGELES
5.	County Assessor's Parcel Number 3126 008 904
6.	Describe location of well to the nearest 40-acre quarter section. State well number (if known)
•	SE 14, of NE 14, Section 27, Township 7N
	Range 12W , B. & M.
,	
	Indicate location of well in the section grid below, or provide a copy of the USGS quadrangle map with the well location marked. The place of use should also be indicated. The grid represents one whole section.
	Section 27 Township 7N Range 12 W
	Quadrangle map name
	· · · · · · · · · · · · · · · · · · ·

WATER USE

							·	-	
		EXTRACT	IONS		When use	is for irrigation	USE	use is other than irri	
Calendar Year	Annual extraction or(specify	-	or o	of measurement of estimate specify)	Crops served	Acreage Supplied	Nature and	d extent of use, i.e. p nanufactured, numbe	opulation
20	214	, unic)		1 meter			 	of stock watered	
Do von	also divert sur	face water?	, N)	•				
_		_	Yes or	No	_				
If answ	er (to 10 above								
						dures			
				_					
				_		****************			
	đ.	Not reporting	•••••	•••••	*****	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	. .]	
				WEL	L DATA				
Is the pl	lace of use also	served by and	other well's	YES.		_ Another wat	er source?	YES	
If yes to	either, describ	ethe Dist	riet is	served by	multiple	wells and	imported	State Water 1	riject
Туре, л	ake and horseg	ower of pump	·	100 Hp	D	ite installed	2005		,
Pump te	ests Edi Condi	son	_,	June 200	5,	617		62.8%	
Power s	Condi upply	Edison		Date		Discharge rate gpm 9 - (3 <i>35</i> 6		Pump efficiency	
	f well	Sour	e fee		Me	ter No. sing diameter		Date installed	inch
	'					te drilled	5/200	ンン	
What are	ravel-packed? e the upper and	Yes or No	of assina	namfamatiana?				690	
			-	-	••	(Show foot	Lower _		
ls log of	well available	? <u>785</u> Vm or N	· ·	Where?	filed u	ofth Dwg	<u> </u>		
Has a ch	emical analysis	s of well water	been ma	de? YES	If yes,	where can it be	obtained?	DHS	
Are wate	er level measur	ements availal	ole?	√e s	Where	? from	Distric	et	
EASE	NOTE THA	Tr-					-		
			fice is a	misdemean	or กมรรมสร	t to Section	5008 of th	e Water Cod	
15.00	<u>filing fee</u> m	ust accomp	any eac	h notice.	or pursua	t to occion	5000 01 t h	c mater Cou	Ç.
- contifer	that the fewer			-43-06-3	11 4				
nd corr	ect to the best	oing required t of my knowl	edge and	nts and the fo. belief.	llowing optio	ual additional s	itatements, i	f any, are true	
Vame _		ON O	year	WSON.		<u>. </u>			
ignatur	e Afligh	W.04	lle						
fitle	<u>SCIVION</u>	<u>Civil</u>	EVA	Weev Date	08/22				
	of P.O.)	·^11	1	J	· -				

*PLEASE COMPLETE. SUBMIT THE OR AND MAKE A COPY FOR YOUR RECORDS*** State of California, State Water Resources Control Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.watemights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION *G193286³G³2005*

2005

If the owner information below is wrong or missing, please correct. OWNER(S) OF RECORD LOS ANGELES COUNTY WATERWORKS:

> RECORDATION NO.: G193286 CONTACT PHONE NO.: (626)458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING: LOS ANGELES COUNTY WATERWORKS DISTRICT NO 34 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803

Owner's Designation of Well

34-6

State Well Number 06N/12W-15H S

Parcel Number

DEADLINE: Notices must be received no later than August 31, 2006 in order to be recorded,

REQUIRED FEES: A filling fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

coming year.

If the above information is inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the TYPE OF DIVERSION Groundwater extraction or 1. Surface diversion 2. OWNERSHIP. Person listed below is: Owner of land on which well or point of diversion is located, and is extracting/diverting water. Lessee of land on which well or point of diversion is located, and is extracting/diverting water. acre-feet Owner of land, but lessee is extracting/diverting water. cubic-feet Other: Please explain: (Must be a specific number) gallons AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR **METHOD OF MEASUREMENT** acre-feet Water Meter Power Meter Nonmetered or Estimated cubic-feet TYPE OF WATER USE Agricultural Domestic or Municipal Other: Annual quantity gallons Season of diversion 7: ACTION REQUESTED (Check one): Begin. Close this file. (Files may be reopened at any time - fee required) End Maximum rate of diversion Record my water use. (Fee required) Do not record my water use but keep my name on mailing list. (No fee required) Transfer this file to: (NEW OWNER'S FIRST NAME) (M. NAME) (LAST NAME) Company Name: _ Address: (CITY) (STATE) (ZIP CODE) Telephone: () Effective Date: SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new land imigation, new method of imigation, etc.) or any other comments

CERTIFICATION AND SIGNATURE: I certify that the forgoing statements are true and correct to the best of my knowledge. Signature: Printed Name (FIRST Company Name:

THIS SPACE FOR OFFICE USE ONLY

AMT:

PLEASE COMPLETE. SUBMIT THE OR___AL AND MAKE A COPY FOR YOUR RECORDS State of California, State Water Resources Control Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000

G192727³G³2005

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

2005

If the owner information below is wrong or missing, please correct. OWNER(S) OF RECORD LA COUNTY WATERWORKS DIST NO 24:

PRIMARY CONTACT OR ABENT FOR MAIL & REPORTING: LA COUNTY WATERWORKS DIST NO 24 DEPT OF PUBLIC WORKS 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

RECORDATION NO.: G192727 CONTACT PHONE NO.: (818)458-7156

Owner's Designation of Well

NO 4

State Well Number 05N/10W-10E S

Parcel Number

DEADLINE: Notices must be received no later than August 31, 2006 in order to be recorded.

REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

1. T	year. YPE OF DIVERSION Ground	water extraction or Surface divers	ion			
	WNERSHIP. Person listed be		3011			·
	Owner of land on which well or poi	nt of diversion is located, and is extractin	g/diverting water.			
	<u>Lessee</u> of land on which well or po <u>Owner</u> of land, but <u>lessee</u> is extract	int of diversion is tocated, and is extracti ting/diverting water.	ng/diverting water.		50	acre-feet
	Other: Please explain:			(Must be a	a specific number)	gallons
3, A1 4. A1	MOUNT OF GROUNDWATER I MOUNT OF SURFACE WATER	EXTRACTED DURING CALENDAR DIVERTED DURING CALENDAR	YEAR —			
5. M	ETHOD OF MEASUREMENT /PE OF WATER USE	Water Meter Power Meter Agricultural Domestic or Municipal	Nonmetered or Estimated Other:	Annual quantity		acre-feet cubic-feet gallons
. AC	CTION REQUESTED (Check o	ne):		Season of diver		
	Close this file. (Files may be re	eopened at any time – fee required)	•	ן צחם		
	Record my water use. (Fee requ	uired)		Maximum rate o	f diversion	
	Transfer this file to:	keep my name on mailing list. (No fee n	equired)			-
	Company Name:	(NEW OWNER'S FIRST NAME)	(M. NAME)	((LAST NAME)	
	Address:					•
	Telephone: ()	(MAILING ADDRESS)	te:	(СПУ)	(STATE)	(ZIP CODE)
. Տ Ս	Telephone: ()	(MAILING ADDRESS)		<u> </u>		-

ertify that the forgoing statements are true and correct to the best of my knowledge. Signature: Printed Name Company Name: THIS SPACE FOR OFFICE USE ONLY AMT:

PLEASE COMPLETE. SUBMIT THE OR. __. AL AND MAKE A COPY FOR YOUR RECORDS*** State of California, State Water Resources Control Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION `G193396³G³2005*

2005

If the owner information below is wrong or missing, please correct. OWNER(S) OF RECORD LA COUNTY WATERWORKS DIST NO 24;

> RECORDATION NO.: G193396 CONTACT PHONE NO.: (818)458-7156

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING: LA COUNTY WATERWORKS DIST NO 24 DEPT OF PUBLIC WORKS 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well

NO. 5

State Well Number

05N/10W-09H01 S

Parcel Number

3046-027-902

AMT:

DEADLINE: Notices must be received no later than August 31, 2006 in order to be recorded.

REQUIRED FEES: A filling fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash,

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

If the above information is inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the coming year.

TYPE OF DIVERSION Groundwater extraction or Surface diversion OWNERSHIP. Person listed below is: Owner of land on which well or point of diversion is located, and is extracting/diverting water. Lessee of land on which well or point of diversion is located, and is extracting/diverting water. (acre-feet Owner of land, but lessee is extracting/diverting water. cubic-feet Other: Please explain: (Must be a specific number) gallons AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR 4. AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR 5. METHOD OF MEASUREMENT acre-feet Water Meter Power Meter Nonmetered or Estimated cubic-feet TYPE OF WATER USE Agricultural Domestic or Municipal Other: Annual quantity gallons Season of diversion 7. ACTION REQUESTED (Check one): Begin Close this file. (Files may be reopened at any time - fee required) End Maximum rate of diversion Record my water use. (Fee required) Do not record my water use but keep my name on mailing list. (No fee required) Transfer this file to: (NEW OWNER'S FIRST NAME) (M. NAME) (LAST NAME) Company Name: _ Address;

(CITY) (STATE) (ZIP CODE) Telephone: () Effective Date: SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new land imigation, new method of imigation, etc.) or any other comments E: I captify that the forgoing statements are true and correct to the best of my knowledge. Signature: Printed Name (M. NAME) Company Name: THIS SPACE FOR OFFICE USE ONLY

PLEASE COMPLETE. SUBMIT THE OK...... AL AND MAKE A COPY FOR YOUR RECORDS State of California, State Water Resources Control Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION G1925503G32005*

2005

If the owner information below is wrong or missing, please correct. OWNER(S) OF RECORD LA COUNTY WATERWORKS DIST NO 27;

> RECORDATION NO.: G192550 CONTACT PHONE NO.: (626)458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING: L A COUNTY WATERWORKS DIST NO 27 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well NO 3

State Well Number 05N/10W-07R S

Parcel Number

DEADLINE: Notices must be received no later than August 31, 2006 in order to be recorded.

REQUIRED FEES: A filling fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

1. 2.	ning year. TYPE OF DIVERSION Ground OWNERSHIP. Person listed be Owner of land on which well or po		Surface diver	•			
3.	<u>Lessee</u> of land on which welf or produced of land, but <u>lessee</u> is extra <u>Other:</u> Please explain:	oint of diversion is loca cting/diverting water, EXTRACTED DURI	ted, and is extract	ing/diverting water.		628 specific number)	acre-feet cubic-feet gallons
4. 5. 6.	AMOUNT OF SURFACE WATE METHOD OF MEASUREMENT TYPE OF WATER USE	Water Meter Pov Agricultural Don	NG CALENDAR ver Meter nestic or Municipal	Nonmetered or Estimated	Annual quantity_	חת	acre-leet czbic-feet gallons
7.	ACTION REQUESTED (Check of Close this file. (Files may be record my water use. (Fee rec	reopened at any time	– fee required)				
	Do not record my water use but Transfer this file to:		iling list. (Na fee i	required)			
	Company Name:	(NEW OWNER'S FIRST	FNAME)	(M. NAME)	(L	AST NAME)	
	Address:	********			<u></u>		
	Telephone: ()	(MAILING ADDI		ele:	(CITY)	(STATE)	(ZIP CODE)

tify that the forgoing statements are true and correct to the best of my knowledge.

Signature:

Printed Name

Company Name: THIS SPACE FOR OFFICE USE ONLY AMT: ***PLEASE COMPLETE. SUBMIT THE OK. ____ AL AND MAKE A COPY FOR YOUR RECORDS***

State of California, State Water Resources Control Board, Division of Water Rights

P.O. BOX 2006, SACRAMENTO, CA 95812-2000 info: (916) 341-5300, FAX: (916) 341-5400, Web; http://www.waterrights.ca.gov
ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

G1931593G32005

2005

if the owner information below is wrong or missing, please correct. OWNER(S) OF RECORD LACOUNTY WATERWORKS DIST NO 38;

RECORDATION NO.: G193159 CONTACT PHONE NO.: (618)458-7156

MMMARY CONTACTOR AGENT FOR MAIL & REPORTING:

L A COUNTY WATERWORKS DIST NO 39

DEPT OF PUBLIC WORKS

900 S FREMONT AVE 9TH FL

ALHAMBRA, CA 91803-1331

Owner's Designation of Well

NO 1

Company Name:

THIS SPACE FOR OFFICE USE ONLY

State Well Number 09N/01W-31R S Parcel Number

ATT:

DEADLINE: Notices must be received no later than August 31, 2006 in order to be recorded.

REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

coming year. 1. TYPE OF DI 2. OWNERSHII	offon is inaccurate, pte VERSION Groun P. Person listed b	ase fine it out in red and dwater extraction or etow is:	provide current Surface diver	Information Notify this offi sion	ORE COMPLETING THIS NO ce if ownership or address change	PTICE se occur during the
<u>Lessee</u> of la <u>Owner</u> of la <u>Other:</u> Plea	ind on which well or p nd, but <u>leasee</u> is extra se explain:		ed, and is extrac	ting/diverting water.	217 (Must be a specific number)	acro-keel autologat gallons
		EXTRACTED DURIN				
	MEASUREMENT	R DIVERTED DURIN Water Meller Powe	G CALENDAN X Meler			acre-freet
6. TYPE OF WA			n nason Islic or Municipal	Nonmeliared or Estimated Other:	Annual quantity	cubic-feet
Close tal Record m Do not re	ny wateruse. (Fee re	reopened at any time - pulred) t keep my name on mait	ng Mist. (No fee	required)	Season of diversion Segin End Missimum rate of diversion	
		(NEW OWNER'S FIRST	NAME)	(M. NAME)	(LAST NAME)	<u>-</u>
	÷; ()	(MAILING ADDR			(CITY) (STATE)	(ZIP CODE)
SUPPLEMEN CERTIFICATI Signature:	TAL INFORMATIO	N. Places list any change			land Integration, new method of Integration e beet of my knowledge.	n, etc.) or any other commen
Printed Name	(FERST HAS	I and an			CAST NAME	<u> </u>

ASE COMPLETE. SUBBLIT THE OF.__JAL AND MAKE A COPY FOR YOUR RECORDS*** State of California, State Water Resources Control Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000

Info: (915) 341-5300, FAX: (916) 341-5406, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION G193395³G³2005*

2005

If the owner information below is wrong or missing, please correct. OWNER(S) OF RECORD LA COUNTY WATERWORKS DIST NO 35;

> RECORDATION NO.: G193395 CONTACT PHONE NO.: (626)300-3395

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING: L A COUNTY WATERWORKS DIST NO 35 DEPT OF PUBLIC WORKS 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well

WELL 2

State Well Number 08N/09W-04A01 S

Parcel Number

3383-9-900

DEADLINE: Notices must be received no later than August 31, 2006 in order to be recorded.

REQUIRED FEES: A filing fee of \$115,00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

If the above information is inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the coming year.

TYPE OF DIVERSION Groundwater extraction or 1. Surface diversion OWNERSHIP. Person fisted below is: Owner of land on which well or point of diversion is located, and is extractino/diverting water. Lessee of land on which well or point of diversion is located, and is extracting/diverting water. Cacre test Owner of land, but lessee is extracting/diverting water. cubic-feet Other: Please exclain: (Must be a specific number) gallons AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR. AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR acra-feet METHOD OF MEASUREMENT Water Meter Nonmetered or Estimated cubio-feet TYPE OF WATER USE Acricultural Domestic or Municipal Other. Armuel quentity gallons Season of diversion 7. ACTION REQUESTED (Check one): Begin Close this file. (Files may be reopened at any time – fee required) End Medimum rate of diversion Record my water use. (Fee regulred) Do not record my water use but keep my name on mailing list. (No fee required) Transfer this file to: (NEW OWNER'S FIRST NAME) (M. NAME) (LAST NAME) Company Name:

SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new land impation, new method of irrigation, etc.) or any other comments prify that the forgoing statements are true and correct to the best of my knowledge. Signature: Printed Name (M. NĂMĒ)

Effective Date:

(MAILING ADDRESS)

Company Name:

Address:

Telephone: ()_

THE SPACE FOR OFFICE USE ONLY

(CITY)

R

(STATE)

(ZIP CODE)

PLEASE COMPLETE. SUBJECT THE OR AL AND MAKE A COPY FOR YOUR RECORDS*** State of California, State Water Resources Control Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000

Info: (918) 341-5309, FAX: (916) 341-5409, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION G192865³G³2005*

2005

If the owner information below is wrong or missing, please correct. OWNER(S) OF RECORD LA COUNTY WATERWORKS DIST NO 38:

> RECORDATION NO.: G192865 CONTACT PHONE NO.: (626)458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING: L A COUNTY WATERWORKS DIST NO 38 DEPT OF PUBLIC WORKS 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well WELL NO 1

THIS SPACE FOR OFFICE USE CHLY

State Well Number 08N/09W-10 S

Parcel Number

AMT:

DEADLINE: Notices must be received no later than August 31, 2006 in order to be recorded.

REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

coming year.

If the above information is inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the TYPE OF DIVERSION Groundwater extraction or 1. Surface diversion OWNERSHIP. Person listed below is: Owner of land on which well or point of diversion is located, and is extracting/diverting water. Lessee of land on which well or point of diversion is located, and is extracting/diverting water. B92 Octobient. Owner of land, but lessee is extracting/diverting water. cubic-feet Other: Please explain: (Must be a specific number) gallons AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR METHOD OF MEASUREMENT acre-fest Water Meter Power Meter Nonmetered or Estimated cubic-feet TYPE OF WATER USE Arricultural Domestic or Municipal Other: Annual quantity anollen Season of diversion 7. ACTION REQUESTED (Check one): Begin. Close this file. (Files may be reopened at any time – fee required). End Maximum rate of diversion Record my water use. (Fee required) Do not record my water use but keep my name on mailing itst. (No fee required) Transfer this file to: (NEW CWINER'S FIRST NAME) (M. NAME) (LAST NAME) Company Name: _ Address: _ (MAJLING ADDRESS) (CITY) (STATE) (ZIP CODE) Telephone: ()__ Effective Date:

SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new land imigation, new method of intigration, etc.) or any other comments CERTIFICATION AND SIGNATURE: 1 cartify that the forgoing statements are true and correct to the best of my knowledge. Date Printed Name (FIRST NAME) (M. NAMÉ) 劃 Company Name:

PLEASE COMPLETE. SUBMIT THE OK. __. IAL AND MAKE A COPY FOR YOUR RECORDS State of California, State Water Resources Control Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION G1932473G3

2005

If the owner information below is wrong or missing, please correct. OWNER(S) OF RECORD L A COUNTY WATERWORKS DIST NO 38:

> RECORDATION NO.: G193247 CONTACT PHONE NO.: (626)458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING: L A COUNTY WATERWORKS DIST NO 38 DEPT OF PUBLIC WORKS 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well

3

State Well Number 06N/09W-10Q01 S Parcel Number

DEADLINE: Notices must be received no later than August 31, 2006 in order to be recorded.

REQUIRED FEES: A filling fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

if the above information is inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the coming year.

TYPE OF DIVERSION 1. Groundwater extraction or Surface diversion OWNERSHIP. Person listed below is: Owner of land on which well or point of diversion is located, and is extracting/diverting water. Lessee of land on which well or point of diversion is located, and is extracting/diverting water. 288 (acre-feet Owner of land, but lessee is extracting/diverting water. cubic-feet Other: Please explain: (Must be a specific number) qallons AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR 4. AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR 5. METHOD OF MEASUREMENT acre-feet Water Meter Power Meter Nonmetered or Estimated 6. TYPE OF WATER USE cubic-feet Agricultural Domestic or Municipal Other: Annual quantity gallons Season of diversion **ACTION REQUESTED (Check one):** 7. Begin Close this file. (Files may be reopened at any time - fee required) End Maximum rate of diversion Record my water use. (Fee required) Do not record my water use but keep my name on mailing list. (No fee required) Transfer this file to: (NEW OWNER'S FIRST NAME) (M. NAME) (LAST NAME) Company Name: Address: _ (MAILING ADDRESS) (CITY) (STATE) (ZIP CODE) Telephone: () Effective Date:

SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new land irrigation, new method of irrigation, etc.) or any other comments TURE: 199 tify that the forgoing statements are true and correct to the best of my knowledge. Signature: Printed Name

Company Name:

THIS SPACE FOR OFFICE USE ONLY

AMT:

PLEASE COMPLETE. SUBMIT THE ORIGINAL AND MAKE'A COPY FOR YOUR RECORDS
State of California, State Water Resources Control Board, Division of Water Rights
P.O. BOX 2000, SACRAMENTO, CA 95812-2000

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.weterrighte.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct. OWNER(8) OF RECORD COUNTY OF LOS ANGELES;



RECORDATION NO.: G192722 CONTACT PHONE NO.: (626)458-7157

PROMARY CONTACT OR AGENT FOR MAIL & REPORTING: COUNTY OF LOS ANGELES WATERWORKS & SEWER MAINT DIV 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well WM J FOX AIRFIELD WELL NO 1

GW-ANN-EXTRT (1-05)

State Well Number

Parcel Number

08NV13W-36N S

DEADLINE: Notices must be received no later than June 38, 2005 in order to be recorded.

REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE we information is inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the

1. 2.	ne above information is inaccurate, please line it out in red and provide current information. Notify this office the state of the current information or Surface diversion. OWNERSHIP. Person Listed below is: Owner of land on which well or point of diversion is located, and is extracting/diverting water.	e ir ownersinh oz aomesa custuda	s occur during the
3.	Lessee of land on which well or point of diversion is located, and is extracting/diverting water. Qwner of land, but lessee is extracting/diverting water. Other: Please explain: AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR	124, 68	Ø acre-feet □ cshic-feet □ gallous
4. 5. 6.	AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR METHOD OF MEASUREMENT TYPE OF WATER USE Agricultural Demostic or Municipal Other: Other:	Armoni quancity Season of Contains	□ ecre-feet □ cubic-feet □ gelions
7.	ACTION REQUESTED: Close this file. (Files may be reopened at any time – fee required) Record my water use. (Fee required) Do not record my water use but keep my name on mailing list. (No fee required) Transfer this file to:	Bagin End Maximum rate of diversion	
	(NEW OWNER'S FIRST NAME) (AL NAME) Company Name:	(LAST NAME)	
	Address:(MAULING ADDRESS)	(CITY) (STATE)	
	Telephone: () Effective Date:	· (52)	(ZIP CODE)
8.			
8. 9. Sigr	Telephone: () Effective Date:	and Irrigation, new method of irrigation	

PLEASE COMPLETE. SUBMIT THE ORIGIN ND MAKE A COPY FOR YOUR RECORDS State of California, State Water Resources Control Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct.



OWNER(S) OF RECORD L A COUNTY WATERWORKS DIST NO 4;

RECORDATION NO.: G192543 CONTACT PHONE NO.: (626)458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING L A COUNTY WATERWORKS DIST NO 4 **DEPT OF PUBLIC WORKS** 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well NO 5 INSTALLED 1947

State Well Number 07N/12W-22B S

Parcel Number

DEADLINE: Notices must be received no later than June 30, 2005 in order to be recorded.

REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

coming year.

If the above information is inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the TYPE OF DIVERSION Groundwater extraction or Surface diversion OWNERSHIP. Person listed below is: Owner of land on which well or point of diversion is located, and is extracting/diverting water. Lessee of land on which well or point of diversion is located, and is extracting/diverting water. Æ acre-feet Owner of land, but lessee is extracting/diverting water. 1100.59 🗆 cubic-feet Other: Please explain: (Must be a specific number) anolleg 🗌 AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR. ☐ acre-feet METHOD OF MEASUREMENT (Water Meter) Power Meter Nonmetered or Estimated □ cubic-feet **TYPE OF WATER USE** Agricultural Domestic or Municipal Annual quantity 🛘 gallons Season of diversion ACTION REQUESTED: Begin Close this file. (Files may be reopened at any time - fee required) End Maximum rate of diversion Record my water use (Fee required) Do not record my water use but keep my name on mailing list. (No fee required) Transfer this file to: (NEW OWNER'S FIRST NAME) (ML NAME) (LAST NAME) Company Name: , Address: (MAILING ADDRESS) (CITY) (STATE) (ZIP CODE) Telephone: () Effective Date: SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new land impation, new method of impation, etc.) or any other comments

9. CERTIFICAT	AND SIGNATURE I certify	that the forgoing statements are true and	d correct to th	e best of my knowledge.		
Signature:	ailu skilli	·	Date	6/28/05	•	
Printed Name	DAVID	W		PEDERSEN		
	(FIRST NAME)	(M. NAME)		(LAST NAME		

MNIELES CONTIT Company Name: L/V THIS SPACE FOR OFFICE USE ONLY

AMT:

PLEASE COMPLETE. SUBMIT THE ORIGINA. AD MAKE A COPY FOR YOUR RECORDS
State of California, State Water Resources Control Board, Division of Water Rights
P.O. BOX 2000, SACRAMENTO, CA 95512-2000

Info: (916) 341-5390, FAX: (916) 341-5400, Web: http://www.waterights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct.

OWNER(8) OF RECORD LA COUNTY WATERWORKS DIST NO 4;



PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING: L. A. COUNTY WATERWORKS DIST NO 4 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

RECORDATION NO.:	G192554
CONTACT PHONE NO.:	(626)458-7157

Owner's Designation of Well	State Well Numi	er Parcel Nu	mber
NO 12	07N/12W-21C	3	
			-
•		•	
DEADLINE: Notices must be rec	ivori na later than Irma 18, 2004	l in notice in he manufact	
EQUIRED FEES: A filing fee of \$115,00 is required for each Annua	Notice of Groundwater Extraction	n and Diversion. Check or money or	rior should indicate v
recordation number(s) and be made payable to:	State Water Resources Control E	loard. Do not send cash.	oca orrodio mancago y
DI EASE DEAD THE CENEDAL INCODUATION			
PLEASE READ THE GENERAL INFORMATION to above information is inaccurate, please line it out in red and provide	current information. Motify this	EPORE COMPLETING THIS NO	IJCE
ming year.	outlook and the contract of th	wice it owner with or somess citaling	a occur ouring tite
	ace diversion		
OWNERSHIP: Person listed below is:			
Owner of land on which well or point of diversion is located, and i	e extracting/diverting water.	•	
Lessee of land on which well or point of diversion is located, and	is extracting/diverting water.	1141 2 20	☑ acre-fee
Owner of land, but lessee is extracting/diverting water. Other: Please explain:		442.18	Cubic-fac
AMOUNT OF GROUNDWATER EXTRACTED DURING CA	LENDAR YEAR	(Mest be a specific name)	🗆 🗆 gallons
AMOUNT OF SURFACE WATER DIVERTED DURING CAL			
METHOD OF MEASUREMENT Water Meter Power Motor		a l	acre-fee
TYPE OF WATER USE Agricultural Optiosalic or I	funicipal Other:	Aureal quantity	□ palags
ACTION REQUESTED:		Seeson of diversion	
Close this file, (Files may be reopened at any time – fee re	· ·	Begin	 _
Record my Water use. (Fee required)	rkinen)	Meximum rate of diversion	
Do not record my water use but keep my name on mailing list.	(No fee required)	·	
Transfer this file to:		•	
(NEW OWNER'S FIRST NAME)	(M. NAME)	(LAST NAME)	
Company Name:		<u> </u>	
Address:			
(MAILING ADDRESS) Telephone: ()	Tective Date:	(CITY) (STATE)	(ZIP CODE)
racpions. ()	IBCING Date:		
SUPPLEMENTAL INFORMATION. Please list any changes in you	r project since lest year (new pump, r	ew land Inigation, new method of Imbatio	n. etc.) or any other co
CERTIFICATION AND SIGNATURE: Legitify that the forgoing	statements are true and correct to	the hest of my knowledge	
A Land The Man		6 landra	•
nature: MT444X, W. (Fellips	Date	0/28/05	
nted Name DAVID	W.	PEDISPUEN!	
(FIRST NAME)	(M. NAME)	(LAST NAME	
mpany Name: LOS ANGBLES COUNTY	· ·	•	
IIS SPACE FOR OFFICE USE ONLY		R.	AMT:
ANN-EXTRT (1-05)			

PLEASE CÓMPLETE. SUBMIT THE ORIGINA. ID MAKE'A COPY FOR YOUR RECORDS*** State of California, State Water Resources Control Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct. OWNER(S) OF RECORD LACOUNTY WATERWORKS DIST NO 4;



RECORDATION NO.: G192555 CONTACT PHONE NO.: (626)458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING: L A COUNTY WATERWORKS DIST NO 4 **DEPT OF PUBLIC WORKS** 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well

NO 13

State Well Number

07N/12W-27 S

Parcel Number

AMT: 🗻

DEADLINE: Notices must be received no later than June 30, 2005 in order to be recorded.

REQUIRED FEES: A filling fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

. If the above information is in assurate interest it is it is and in all in a discount.	January - 1 1 - 6 47 11 - 47 48 48	DRE COMPLETING THIS NOT	<u>iice</u>
if the above information is inaccurate, please line it out in red and provide coming year.	re current intormation. Notify this office	e if ownership or address changes	occur during the
	face diversion		
2. OWNERSHIP. Person listed below is:			
Owner of and on which well or point of diversion is located, and	is extracting/diverting water		
Lessee of land on which well or point of diversion is located, and			·
Owner of land, but lessee is extracting/diverting water.	and controlling trates,	188.01	🗷 acre-feet
Other: Please explain:	·		Cubic-feet
3. AMOUNT OF GROUNDWATER EXTRACTED DURING CA	ALENDAR YEAR	(Must be a specific number)	🔲 gallons
4. AMOUNT OF SURFACE WATER DIVERTED DURING CA			
5. METHOD OF MEASUREMENT Water Meter Power Meter	F.		☐ acre-feet ☐ cubic-feet
6. TYPE OF WATER USE Agricultural Domestic or		Annual quantity	□ cudic-reet □ gallons
		Season of diversion	. 🗀 gamons
7. ACTION REQUESTED:		Begin	
Close this file. (Files may be reopened at any time fee r	equired) .	tms	
Record my water use. (Fee required)		Maximum rate of diversion	
Do not record my water use but keep my name on mailing list	t. (No fee required)	-	· · · · · · · · · · · · · · · · · · ·
	(
Transfer this file to:			
(NEW OWNER'S FIRST NAME	(M, NAME)	(LAST NAME)	
	(M, NAME)	(LAST NAME)	10.1°-11
(NEW OWNER'S FIRST NAME Company Name: Address:	(M, NAME)	(LAST NAME)	
(NEW OWNER'S FIRST NAME Company Name: Address:(MAILING ADDRESS)	(M. NAME)	(LAST NAME) (CITY) (STATE)	(ZIP CODE)
(NEW OWNER'S FIRST NAME Company Name: Address:(MAILING ADDRESS)	(M. NAME)	<u> </u>	(ZIP CODE)
Company Name:(NEW OWNER'S FIRST NAME Address:(MAILING ADDRESS) Telephone: ()	(M. NAME) Effective Date:	(CITY) (STATE)	
(NEW OWNER'S FIRST NAME Company Name: Address:(MAILING ADDRESS)	(M. NAME) Effective Date:	(CITY) (STATE)	
Company Name: Address: (MAILING ADDRESS) Telephone: ()	(M. NAME) Effective Date: ur project since last year (new pump, new l	(CITY) (STATE)	
Company Name:(NEW OWNER'S FIRST NAME Address:(MAILING ADDRESS) Telephone: ()	(M. NAME) Effective Date: ur project since last year (new pump, new l	(CITY) (STATE)	
Company Name: Address: (MAILING ADDRESS) Telephone: () (MAILING ADDRESS) 8. SUPPLEMENTAL INFORMATION. Please list any changes in your control of the forgoing of the forg	(M. NAME) Effective Date: our project since last year (new pump, new last year)	(CITY) (STATE) land irrigation, new method of irrigation best of my knowledge.	
Company Name: Address: (MAILING ADDRESS) Telephone: ()	(M. NAME) Effective Date: ur project since last year (new pump, new l	(CITY) (STATE) land irrigation, new method of irrigation best of my knowledge.	
Company Name: Address: Telephone: () (MAILING ADDRESS) Telephone: () (MAILING ADDRESS) 8. SUPPLEMENTAL INFORMATION. Please list any changes in your control of the forgoing signature:	(M. NAME) Effective Date: our project since last year (new pump, new last year) statements are true and correct to the	(CITY) (STATE) land irrigation, new method of irrigation best of my knowledge.	
Company Name: Address: (MAILING ADDRESS) Telephone: () (MAILING ADDRESS) 8. SUPPLEMENTAL INFORMATION. Please list any changes in your control of the forgoing of the forg	(M. NAME) Effective Date: our project since last year (new pump, new last year)	(CITY) (STATE) land irrigation, new method of irrigation best of my knowledge.	

THIS SPACE FOR OFFICE USE ONLY

PLEASE COMPLETE. SUBMIT THE ORIGINA ID MAKE A COPY FOR YOUR RECORDS
State of California, State Water Resources Control Board, Division of Water Rights
P.O. BOX 2000, SACRAMENTO, CA 95812-2000

info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct.

OWNER(S) OF RECORD L A COUNTY WATERWORKS DIST NO 4;



PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING:

L A COUNTY WATERWORKS DIST NO 4

DEPT OF PUBLIC WORKS

900 S FREMONT AVE 9TH FL

ALHAMBRA, CA 91803-1331

RECORDATION NO.: G192729 CONTACT PHONE NO.: (626)458-7157

Owner's Designation of Well

NO 15

State Well Number 07N/12W-11M S **Parcel Number**

DEADLINE: Notices must be received no later than June 30, 2005 in order to be recorded.

REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

If the above information is inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the coming year.

coming year.	·	•	. '		
	rater extraction or Surface div	version			
OWNERSHIP. Person listed below					
Owner of land on which well or point					
Lessee of land on which well or poin		racting/diverting water.			20 acre-feet
Owner of land, but lessee is extracti	ng/diverting water.		1 13	8 , ኢዛ	Cubic-feet
Other: Please explain:			(Must be a s	pecific number)	☐ galions
3. AMOUNT OF GROUNDWATER E			, 	· · · · · · · · · · · · · · · · · · ·	, 8-11-11
I. AMOUNT OF SURFACE WATER		AR YEAR	•		. 🔲 acre-feet
-	Water Meter Power Meter	Nonmetered or Estimated	1	٠.	☐ cubic-feet
6. TYPE OF WATER USE	Agricultural Comestic or Municip	gal Other:	Annual quantity		🔲 gallons
'. ACTION REQUESTED:		•	Season of diversio Begin		
•	opened at any time – fee required	d)	End		
Record my water use (Fee requ		-,	Maximum rate of o	liversion _	<u> </u>
	eep my name on mailing list. (No f	ee required)	<u></u>		·
Transfer this file to:					
	(NEW OWNER'S FIRST NAME)	(M. NAME)	(LAST NAME)	
Company Name:					
Address:					
	(MAILING ADDRESS)	· · · · · · · · · · · · · · · · · · ·	(CITY)	(STATE)	(ZIP CODE)
Telephone: ()		e Dale:			

CERTIFICATION AND SIGNATURE: Log tify the forgoing statements are true and correct to the best of my knowledge.

Signature: Date DE/ZE/DS

Printed Name DAVID W. PEPFRSEN

(FIRST NAME) (M. NAME) (LAST NAME

THIS SPACE FOR OFFICE USE ONLY

R. AMT:

PLEASE COMPLETE. SUBMIT THE ORIGINA ID MAKE'A COPY FOR YOUR RECORDS
State of California, State Water Resources Control Board, Division of Water Rights
P.O. BOX 2000, SACRAMENTO, CA 95812-2000



2004

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct.

OWNER(S) OF RECORD LA COUNTY WATERWORKS DIST NO 4;

RECORDATION NO.: G192942 CONTACT PHONE NO.: (626)458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING:

L A COUNTY WATERWORKS DIST NO 4

DEPT OF PUBLIC WORKS

900 S FREMONT AVE 9TH FL

ALHAMBRA, CA 91803-1331

Owner's Designation of Well WELL NO 22

State Well Number 07N/13W-24M S **Parcel Number**

DEADLINE: Notices must be received no later than June 30, 2005 in order to be recorded.

REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

he above information is inaccurate, please line it out in red and provide current information. Notify this offi	ico ii omilaloliib	or accress changes	occur during the
ming year.			_
TYPE OF DIVERSION Groundwater extraction or Surface diversion			
OWNERSHIP. Person listed below is:		•	•
Owner of and on which well or point of diversion is located, and is extracting/diverting water.			•
Lessee of land on which well or point of diversion is located, and is extracting/diverting water.			🔀 acre-feet
Owner of land, but lessee is extracting/diverting water.	1	<u> ኢነዓ.</u> 04	🗆 cubic-feet
Olher, Please explain;	(Must be	a specific number)	☐ galions
AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR			
AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR	·		acre-feet
METHOD OF MEASUREMENT Water Meter Power Meter Nonmetered or Estimated	ı		Cubic-feet
TYPE OF WATER USE Agricultural Domestic or Municipal Other:	Annual quantity		☐ gations
ACTION REQUESTED:	Season of diver		
Close this file. (Files may be reopened at any time – fee required)	1 6		
Record my water use. (Fee required)	Maximum rate	of diversion	
Do not record my water use but keep my name on mailing list. (No fee required)			
Transfer this file to:			
(NEW OWNER'S FIRST NAME) (M. NAME)		(LAST NAME)	
Company Name:		· · · · · · · · · · · · · · · · · · ·	
Address:			
(MAILING ADDRESS)	(CITY)	(STATE)	(ZIP CODE)
Telephone: () Effective Date:			(411 0002)
SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new	v l and irrigation, no	ew method of imigation	a, etc.) or any other comm
· · · · · · · · · · · · · · · · · · ·			

9. CERTIFICATION AND SKONATURE: I certify that the forgoing statements are true and correct to the best of my knowledge.

Signature: Date 06/28/05

Printed Name DAVID W. PEPERSEN

rinted Name PHVD W. MEVERSETV

(FIRST NAME) (M. NAME) (LAST NAME

Company Name: LDS ANGELES COUNT | THIS SPACE FOR OFFICE USE ONLY R. AMT:

PLEASE COMPLETE. SUBMIT THE ORIGINA. ID MAKE A COPY FOR YOUR RECORDS State of California, State Water Resources Control Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct. OWNER(S) OF RECORD LACOUNTY WATERWORKS DIST NO 4;



PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING: L A COUNTY WATERWORKS DIST NO 4 **DEPT OF PUBLIC WORKS** 900 S FREMONT AVE 9TH FL

RECORDATION NO.: G192945 CONTACT PHONE NO.: (626)458-7157

R.

AMT:

Owner's Designation of Well

WELL NO 25

State Well Number 07N/12W-21C S

Parcel Number

ALHAMBRA, CA 91803-1331

DEADLINE: Notices must be received no later than June 30, 2005 in order to be recorded.

REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVIEWS SIDE RECORD COMPLETING THIS NOTICE

COU It (I	ne above information is inaccurate, please line it out in red and provide current information. Notify this offic ning year.	e if ownership o	r address changes	occur during the
1. 2.	TYPE OF DIVERSION Groundwater extraction or Surface diversion OWNERSHIP. Person listed below is:		•	
	Owner of land on which well or point of diversion is located, and is extracting/diverting water.			•
	Lessee of land on which well or point of diversion is located, and is extracting/diverting water.		··· \.	⊠acre-feet
	Owner of land, but lessee is extracting/diverting water.	7	03.77	aubic-feet
_	Other: Please explain:	Must be	specific number)	Gallons
3.	AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR			
f .	AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR			☐ acre-feet
5.	METHOD OF MEASUREMENT Water Meter Power Meter Nonmetered or Estimated			🖸 cubic-feet
ð.	TYPE OF WATER USE Agricultural Demestic or Municipal Other.	Annual quantity		, 🖸 gallons
7.	ACTION REQUESTED:	Season of divers		•
•	Close this file (Files may be reopened at any time – fee required)	Enc	តែ 	
	Record my water use (Fee required)	Maximum rate o	f diversion	
	Do not record my water use but keep my name on mailing list. (No fee required)		···	
	Transfer this file to:			•
	(NEW OWNER'S FIRST NAME) (M. NAME)		(LAST NAME)	
	Company Name:	 .	<u> </u>	
	Address:(MAILING ADDRESS) Telephone: () Effective Pole:			
	(MAILING ADDRESS)	(CITY)	(STATE)	(ZIP CODE)
	Telephone: () Effective Date:		(=)	(211 000 2)
,	CUIDO EMENTAL INCODUATION -		-	•
	SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new	land inigation, ne	w method of irrigation	i, etc.) or any other comm

Wi

(M. NAME)

GW-ANN-EXTRT (1-05)

THIS SPACE FOR OFFICE USE ONLY

Company Name:

Signature: _

Printed Name

PLEASE COMPLETE. SUBMIT THE ORIGINA. ID MAKE'A COPY FOR YOUR RECORDS State of California, State Water Resources Control Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2006

Info: (918) 341-5300, FAX: (916) 341-5400, Web: http://www.waterfighte.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct. OWNER(S) OF RECORD L A COUNTY WATERWORKS DIST NO 4:



PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING: L A COUNTY WATERWORKS DIST NO 4

RECORDATION NO.: G193045 CONTACT PHONE NO.: (828)458-7157

DEPT OF PUBLIC WORKS 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well

NO 26

State Well Number

07N/12W-15R S

Parcel Number

DEADLINE: Notices must be received no later than June 30, 2005 in order to be recorded,

REQUIRED FEES: A filling fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash,

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE REFORE COURS ETHIC THIS MOTICE

	Telephone: ()	(MAILING ADDRESS) Effective D	ale	(CITY)	(STATE)	(ZIP CODE)
	Address:	ANUAIO INDESSE	<u> </u>	*****		
	Company Name:	· · · · · · · · · · · · · · · · · · ·	<u> </u>	- ·	(m mr range)	
	Transfer this file to:	(NEW OWNER'S FIRST NAME)	(NL NAME)	- 11 - 11	(LAST NAME)	
		but keep my name on mailing list. (No fee	requirea)			
,	Record finy water use (Fee	• •				
		e reopened at any time fee required)		En Maximum cate o		
AC	TION REQUESTED:			I	ch	
	· - · · · · · · · · · ·	Administration Colleges a service	OURIL	Assemi quantity Seesast of diver		
	PE OF WATER USE	Agricultural Domestic or Municipal	Nonmetered or Estimated Other:			Cubic-feet
	THOD OF MEASUREMEN					_ 🛮 acre-feat
		R EXTRACTED DURING CALENDAI TER DIVERTED DURING CALENDAR				
	<u>Xher</u> Piease explain:	TO EVER A CTURE DAYS HAVE ON A CHIEF AND A CTURE AND A	VE ID	(Must be	a specific number)	□ grailous
	<u>Dwner</u> of land, but <u>leases</u> is ex	racting/diverting water.	•	13	<u> </u>	🗆 auble-feet
		point of diversion is located, and is extract	ing/diverting water.			28 acre-fect
		point of diversion is located, and is extracti			-	
	VNERSHIP. Person listed					
, tyi	PE OF DIVERSION GO	indwater extraction or Surface divers	skon			
ning y	Total					

9. CERTIFICAT	PHYAND SIGNATURE: 100	tify the the forgoing sta	tements are true an	d correct to the	best of my knowledge.		
Signature:	auf W. Ole	llu			65/30/05		
Printed Name	DAVID		W.		PEDERSEN		
Company Name:	LOS Angeles	County	(M. NAME)		(LAST NAME		,
TI野 穿棋走 FOR O	FFICE USE CALLY	Ū		•	R.	AMT:	

*PLEASE COMPLETE. SUBMIT THE ORIGINAL DIMAKE'A COPY FOR YOUR RECORDS*** State of California, State Water Resources Control Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000

2004

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct. OWNER(8) OF RECORD LA COUNTY WATERWORKS DIST NO 4;

> RECORDATION NO.: G193048 CONTACT PHONE NO.: (826)458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING: L A COUNTY WATERWORKS DIST NO 4 **DEPT OF PUBLIC WORKS** 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well

NO 27

State Well Number 07NV12W-24M S

Percel Mumber

AMT:

DEADLINE: Notices must be received no later than June 30, 2005 in order to be recorded. REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash,

ing year. TYPE OF DIVERSION Groundwater extraction or Surface diversion		1
OWNERSHIP, Person listed below is:		
Owner of land on which well or point of diversion is located, and is extracting/diverting water.		•
Lessee of land on which well or point of diversion is located, and is extracting/diverting water.		K acra-foet
Owner of land, but lessee is extracting/diverting water.	175,8	Cable-fee
Other: Please explain:	(Most be a specific r	
AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR		
AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR	>	☐ acre-feet
METHOD OF MEASUREMENT Water Meter Power Mater Nononestated or Estimate	i ŀ	, Gebic-feet
TYPE OF WATER USE Agricultural Connectic or Augustical Other:	Annual quantity	 gelica s
ACTION REQUESTED:	Season of dispraion Books	•
Close this file. (Files may be reopened at any time – fee required)	Etal	
Record my water lies. (Fee required)	Maximum rate of diversion	
Do not record my water use but keep my name on mailing list. (No fee required)	· l	
Transfer this file to:	•	
(NEW OWNER'S FIRST NAME) (M. NAME)	(LAST N	(AME)
Company Name:		<u> </u>
Address:	•	
(MAILING ADDRESS)	(CITY) (S	TATE) (ZIP CODE)
Telephone: () Effective Date:		
OURSE FIRE AL INFORMATION -		
SUPPLEMENTAL INFORMATION. Places list any changes in your project since lest year (new pump, r	eer land irrigation, new method	of infigation, etc.) or any other con

(M. NAME)

GW-ANN-EXTRT (1-05)

THIS SPACE FOR CFFECE USE ONLY

Company Name:

(FIRST NAME)

WCELISS

Signature:

Printed Name

ASE COMPLETE. SUBMIT THE ORIG AND MAKE A COPY FOR YOUR RECORDS***
State of California, State Water Resources Control Board, Division of Water Rights PLEASE COMPLETE. P.O. BOX 2000, SACRAMENTO, CA 95812-2000 Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov

2004

ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION If the owner information below is wrong or missing, please correct.

OWNER(S) OF RECORD LA COUNTY WATERWORKS DIST NO 4;

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING: L A COUNTY WATERWORKS DIST NO 4 **DEPT OF PUBLIC WORKS** 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

RECORDATION NO.: G193048 CONTACT PHONE NO.: (626)458-7157

R.

AMT;

Owner's Designation of Well

NO 29

State Well Number 07N/12W-34N S

Parcel Number

DEADLINE: Notices must be received no later than June 30, 2005 in order to be recorded.

REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

If the above information is inaccurate,	please line it out in red and provide current information	on. Notify this office if ownership or address changes occur during	s the
coming year.			

If the above information is inaccurate, please line it out in red and provide current informatio coming year.	on. Notify this office if ownership or address changes occur during the
TYPE OF DIVERSION Groundwater extraction or Surface diversion OWNERSHIP: Person listed below is:	·
Owner of land on which well or point of diversion is located, and is extracting/divertir Lessee of land on which well or point of diversion is located, and is extracting/divertif Owner of land, but lessee is extracting/diverting water. Other: Piease explain: 3. AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR-	ing water. U 3, 15 Cubic
4. AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR -	ered or Estimated
Do not record my water use but keep my name on mailing list. (No fee required) Transfer this file to:	T-11-
(NEW OWNER'S FIRST NAME) Company Name:	(M. NAME) (LAST NAME)
Address:(MAILING ADDRESS)	(CITY) (STATE) (ZIP CODE)
Telephone: () Effective Date: . SUPPLEMENTAL INFORMATION. Please list any changes in your project since last ye	ear (new pump, new land irrigation, new method of irrigation, etc.) or any other

🏿 the forgoing statements are true and correct to the best of my knowledge.

Signature: **Printed Name** (FIRST NAME) (M. NAME) (LAST NAME Company Name: THIS SPACE FOR OFFICE USE ONLY

GW-ANN-EXTRT (1-05)

LEASE COMPLETE. SUBMIT THE ORIG. ___ AND MAKE'A COPY FOR YOUR RECORDS***

State of California, State Water Resources Control Board, Division of Water Rights ***PLEASE COMPLETE. P.O. BOX 2000, SACRAMENTO, CA 95812-2000

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct. OWNER(S) OF RECORD LACOUNTY WATERWORKS DIST NO 4:



PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING: L A COUNTY WATERWORKS DIST NO 4 **DEPT OF PUBLIC WORKS** 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

RECORDATION NO.: G193105 CONTACT PHONE NO.: (626)458-7157

R.

Owner's Designation of Well

NO 30

State Well Number 07N/12W-34 S

Parcel Number

DEADLINE: Notices must be received no later than June 30, 2005 in order to be recorded.

REQUIRED FEES: A filling fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash,

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

1. 2.	ming year. TYPE OF DIVERSION Groundwater extraction or Surface diversion OWNERSHIP: Person listed below is:			•
	Owner of land on which well or point of diversion is located, and is extracting/diver	ting water.		
	Lessee of land on which well or point of diversion is located, and is extracting/dive	rting water.		Ø t
	Owner of land, but lessee is extracting/diverting water.		563.27	⊠ acre-feet □ cubic-feet
	Other: Please explain:		ust be a specific number)	
3.	AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR	—	par de a aheerte nominal	☐ gallons
4.	AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR			□ acre-feet
5.	METHOD OF MEASUREMENT (Water Meter) Power Meter Nontrik	etered or Estimated		□ acre-reer □ cubic-feet
6.	TYPE OF WATER USE Agricultural (Domestic or Municipal) Officer	Annual q	rantitu	□ conic-reet □ gaflons
_			f diversion	Garouz
7.	ACTION REQUESTED:		Begin	
	Close this file. (Files may be reopened at any time – fee required)	[End	
	Record my water use. (Fee required)	numixeM	rate of diversion	· ·
	Do not record my water use but keep my name on mailing list. (No fee required)		·
	Transfer this file to:	· 		
	(NEW OWNER'S FIRST NAME)	(M. NAME)	(LAST NAME)	
	Company Name:			
	Address:	•		
	(MAILING ADDRESS)	(CITY)	(STATE)	(ZIP CODE)
	Telephone: () Effective Date:	(5/11)	(OIAIL)	(CIL COOL)

ND SIGNATURE: Agertify that the forgoing statements are true and correct to the best of my knowledge. Signature: **Printed Name** FIRST NAME) (M. NAME) (LAST NAME Company Name: THIS SPACE FOR OFFICE USE ONLY

GW-ANN-EXTRT (1-05)

PLEASE COMPLETE. SUBMIT THE ORIG. AND MAKE A COPY FOR YOUR RECORDS*** State of California, State Water Resources Control Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000

2004

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner Information below is wrong or missing, please correct. OWNER(S) OF RECORD LACOUNTY WATERWORKS DIST NO 4;

> RECORDATION NO.: G193107 CONTACT PHONE NO.: (626)458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING: L A COUNTY WATERWORKS DIST NO 4 **DEPT OF PUBLIC WORKS** 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well

NO 32

State Well Number

Parcel Number

07N/12W-27 S

DEADLINE: Notices must be received no later than June 30, 2005 in order to be recorded.

REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

If the above information is inaccurate, p	HE GENERAL INFORMATION ON TH Diease line it out in red and provide current in			
coming year. 1. TYPE OF DIVERSION Gro 2. OWNERSHIP. Person listed	below is:			
Lessee of land on which well o Owner of land, but lessee is ex Other: Please explain: 3. AMOUNT OF GROUNDWATE	R EXTRACTED DURING CALENDAR	ng/diverting water,	812.53 (Must be a specific number)	B acre-feet □ cubic-feet □ gallons
 4. AMOUNT OF SURFACE WATER 5. METHOD OF MEASUREMEN 6. TYPE OF WATER USE 7. ACTION REQUESTED: 	T Water Meter Power Meter Agricultural Domestic or Municipal	YEAR — Nonmetered or Estimated Other:	Arrival quantity Season of diversion Begin	□ acre-feat □ cubic-feet □ gallons
Record my water use. (Fee			End Maximum rate of diversion	
Transfer this file to:		· · · · · · · · · · · · · · · · · · ·	- w-t-	
Company Name:	(NEW OWNER'S FIRST NAME)	(M. NAME)	(LAST NAME)	
Address:	(MAILING ADDRESS)		(CITY) (STATE)	(ZIP CODE)
Telephone: ()		ate:	(OIT) (OIXIE)	(ZIP CODE)
8. SUPPLEMENTAL INFORMAT	ION. Please list any changes in your project si	nce last year (new pump, ne	w land inigation, new method of inigation	, etc.) or any other comme

	ON AND SIGNATURE I certify that the forgoing st	atements are true and com-	ect to the best of my knowledge.		
Signature:	Med W. Vellen	1	Date 06/24/05		_
Printed Name	DAVID	Wes	PEDERSEN	•	•
Company Name:	(FIRST NAME) LA COUNTY	(M. NAME)	(LAST NAME	-	

GW-ANN-EXTRT (1-05)

THIS SPACE FOR OFFICE USE ONLY

Info: (616) 341-5390, FAX: (916) 341-5400, Web: http://www.wateriighte.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct.

OWNER(8) OF RECORD LA COUNTY WATERWORKS DIST NO 4;



PRIMARY CONTACT ON AGENT FOR MAIL & REPORTING.

L. A COUNTY WATERWORKS DIST NO 4

DEPT OF PUBLIC WORKS

900 S FREMONT AVE 9TH FL

ALHAMBRA, CA 91803-1331

RECORDATION NO.: G193108 CONTACT PHONE NO.: (826)458-7157

Owner's Designation of Well

NO 33

State Well Number

Percel Number

07N/12W-27 S

DEADLINE: Notices must be received no later than June 30, 2005 in order to be recorded.

REQUIRED FEES: A filling fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable for: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

If the above information is inaccurate	, please line it out in red and provide currer	nt information. Notify this office if owne	rehip or address changes occur during the
coming year.	<u></u>	•	, , , , , , , , , , , , , , , , , , , ,

1. TYPE OF DIVERSION Groundwater extraction or Surface diversion 2. OWNERSHIP. Person listed below is: Owner of lend on which well or point of diversion is located, and is extracting/diverting water. Lesses of lend on which well or point of diversion is located, and is extracting/diverting water.
Owner of leight on which well or point of diversion is located, and is extracting/diverting water. Lesses of land on which well or point of diversion is located, and is extracting/diverting water.
Lessee of land on which well or point of diversion is located, and is extracting/diverting water.
A
Owner of land, but lessee is extracting/diverting water.
Other: Please explain:
3. AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR
I. AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR
5. METHOD OF MEASUREMENT Water Meter Power Motor. Nonmetered or Estimated
5. TYPE OF WATER USE Agricultural Consents or Municipal Other Assembly greatity
Season of diversion
7. ACTION REQUESTED:
Close this file. (Files may be reopened at any time – fee required) Maximum rate of diversion
Record my water use. (Fee required)
Do not record my water use but keep my name on mailing list. (No fee required)
Transfer this file to:
(NEW OWNER'S FIRST NAME) (M. NAME) (LAST NAME)
Company Name:
Address:
(MALLING ADDRESS) (CITY) (STATE) (ZIP CODE)
Telephone: () Effective Date:
CIDDI EMENTAL INCOMMATION Places and are about the last and are a

9. CERTIFICATION FAND SIGNATURE: 1 confly that the longor	ing statements are true and correct	to the best of my knowledge.	•	
Signature: Waris W. Weller	Da	to 06/20/05		
Printed Name PAVID	W.	PEPERSER	1.	-
I A (FRST NAME)	(M. NAME)	(LAST NAME	• .	
THIS SPACE FOR OFFICE USE ONLY			AMT:	, 1

PLEASE COMPLETE. SUBMIT THE ORIGI. AND MAKE A COPY FOR YOUR RECORDS State of California, State Water Resources Control Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct. OWNER(S) OF RECORD LA COUNTY WATERWORKS DIST NO 4:



PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING: L A COUNTY WATERWORKS DIST NO 4 **DEPT OF PUBLIC WORKS** 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

RECORDATION NO.: G193109 CONTACT PHONE NO.: (626)458-7157

Owner's Designation of Well

NO 34

State Well Number 07N/12W-27 S

Parcel Number

DEADLINE: Notices must be received no later than June 30, 2005 in order to be recorded.

REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

If the above information	is inaccurate,	please line it out in red an	d provide current information.	Notify this office if ownership	or address changes occur durin	a the
coming year.				•	3	3

. TYPE OF DIVERSION Gro . OWNERSHIP. Person listed	below is:				•
<u>Lessee</u> of land on which well o <u>Owner</u> of land, but <u>lessee</u> is ex <u>Olher</u> ; Ptease explain:	point of diversion is located, and is extracting point of diversion is located, and is extraction tracting/diverting water. ER EXTRACTED DURING CALENDAR	ng/diverting water.		マラ. 93 ecific number)	≥ acre-feet □ cubic-feet □ ga#ons
	TER DIVERTED DURING CALENDAR		Annual quantity Season of diversion Begin		□ acre-feet □ cubic-feet □ gallons
•	pe reopened at any time – fee required) required)	1	End End Maximum rate of div		
Do not record my water use Transfer this file to:	but keep my name on mailing list. (No fee r	equired)		- '	· ·
•	(NEW OWNER'S FIRST NAME)	(M. NAME)	(L	AST NAME)	
Address:	(MAILING ADDRESS)		CITY	(OTATE)	GIR CODES
Telephone: ()	Effective Da		CITY)	(STATE)	(ZIP CODE)

That the forgoing statements are true and correct to the best of my knowledge.

(M. NAME)

Date

R.

AMT:

GW-ANN-EXTRT (1-05)

Company Name: 4 THIS SPACE FOR OFFICE USE ONLY

Signature:

Printed Name

"PLEASE COMPLETE. SUBMIT THE ORIGIN. AND MAKE'A COPY FOR YOUR RECORDS*** State of California, State Water Resources Control Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000

info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct. OWNER(8) OF RECORD LA COUNTY WATERWORKS DIST NO 4:



PREMARY CONTACT OR AGENT FOR MAIL & REPORTING: L A COUNTY WATERWORKS DIST NO 4 **DEPT OF PUBLIC WORKS** 900 S FREMONT AVE 9TH FL

ALHAMBRA, CA 91803-1331

RECORDATION NO.: , G183180 CONTACT PHONE NO.: (828)458-7157

Owner's Designation of Well

NO 38

State Well Number 07N/12W-09M S

Parcel Number

DEADLINE: Notices must be received no later than June 30, 2005 in order to be recorded.

REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

If the above inform	ration i	is inaccurate, please line it out in red and provide current information.	. Notify this office if ownership or endress changes occur during the
coming year.			
· · · · · · · · · · · · · · · · · · ·			

OIT	ing year.		•		-	_	
	TYPE OF DIVERSION Ground	twater extraction or Surface div	ension			•	
,	OWNERSHIP. Person listed be	slow is:					
<	Owner of land on which well or po	int of diversion is located, and is extra	cting/diverting water.				
	Lessee of land on which well or po	oint of diversion is located, and is extra	acting/diverting water.			Ø scr⊪isst	
	Owner of land, but lessee is extracting/diverting water.			287.18		☐ cable-feat	
	Other: Plaese explain:			(Mart he a s	pecific suretier)		
		EXTRACTED DURING CALEND	-				
	AMOUNT OF SURFACE WATE	R DIVERTED DURING CALENDA	\R YEAR			□ acro-foot	
	METHOD OF MEASUREMENT	Water Moler Power Meter	Nonmetered or Estimated			D colic-fast	
	TYPE OF WATER USE	Agricultural Domestic or Municipal	Other:	Annual questity		☐ gallons	
	LATION REGULERATES			Season of diversion		•	
	ACTION REQUESTED: Close this IIIs. (Files may be reopened at any time – fee required)			Begin Set Mastropa rate of electrica			
							
		Record my water use. (Fee required)					
	Do not record my water use but keep my name on mailing list. (No fee required)						
	Transfer this file to:						
	Compony Name	(NEW OWNER'S FIRST NAME)	(M. NAME)	(LAST NAME)		
	Company Name.						
	Address:			_			
		(MAILING ADDRESS)		(CITY)	(STATE)	(ZIP CODE)	
	Telephone: ()	Effective	e Date:				

	···	<u>-</u> .	•
ing statements are true and co	rrect to the best of my knowledge.		
	Date 06/28/05		
W	PEDERSA		,
(M. NAME)	(LAST NAME	•	
	W4	W. PEDERSAL	Date Ob/28/05 W. PEDERSON

PLEASE COMPLETE. SUBMIT THE ORIGIN. AND MAKE'A COPY FOR YOUR RECORDS*** · State of California, State Water Resources Control Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000

2004

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

if the owner information below is wrong or missing, please correct. OWNER(S) OF RECORD LA COUNTY WATERWORKS DIST NO 4;

> RECORDATION NO.: G193161 CONTACT PHONE NO.: (828)458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING: L A COUNTY WATERWORKS DIST NO 4 **DEPT OF PUBLIC WORKS** 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well

NO 37

State Well Number

07N/12W-30B S

Parcel Number

DEADLINE: Notices must be received no later than June 30, 2005 in order to be recorded.

REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash,

If the above in	normation is	inaccurate,	please line it out in red a	nd provide current information.	Notify this office if ownership or address changes occur during the
coming year.			· · · · · · · · · · · · · · · · · · ·	•	, , , , , , , , , , , , , , , , , , ,

	ning year.		
•	TYPE OF DIVERSION Groundwater extraction or Surface diversion		
_	OWNERSHIP. Person listed below is:		
	Owner of Band on which well or point of diversion is located, and is extracting/diverting water.		٠
	Lessee of fand-on which well or point of diversion is located, and is extracting/diverting water.		⊠ ecro-fect
	Owner of land, but lessee in extracting/diverting water.	565.68	□ cubio fant
	Other: Please explain:	(Mest be a specific number)	
L.	AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR		O from a
Ļ,	AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR		acre-feet
	METHOD OF MEASUREMENT (Wilder Meter Nonmetered or Estimated		□ cubalc-feet
	TYPE OF WATER USE Agricultural (Domestic or Municipal Other	Armeel grantity	□ gallens
		Seesan of diversion	1
	ACTION REQUESTED:	Begin	
	Close this file. (Files may be reopened at any time – fee required)	End	<u> </u>
	Record my water use. (Fee required)	Missimum rate of diversion	·
	Do not record my water use but keep my name on mailing list. (No fee required)		•
	Transfer this file to:		
	(NEW OWNER'S FIRST NAME) (M. NAME)	(LAST NAME)	
	Company Name:		
	Address:		•
	· · · · · · · · · · · · · · · · · · ·	(CITY) (STATE)	(ZIP CODE)
	Telephone: () Effective Dale;	(OIAIE)	(AE COLC)

9. CERTIFICATION AND SIGNATURE: Agently for the forgoing	statements are true and o	orrect to the best of my knowledge.	
Signature: Walk W. (Valleur)		Date 06/28/05	
Printed Name PAVID	Ws	PEDERSEN	
Company Name: 4 CIVNTY	(M. NAME)	(LAST NAME	
THIS SPACE FOR OFFICE USE ONLY		R.	AMT:

PLEASE COMPLETE. SUBMIT THE ORIGIN— AND MAKE A COPY FOR YOUR RECORDS
State of California, State Water Resources Control Board, Division of Water Rights
P.O. BOX 2000, SACRAMENTO, CA 95812-2000

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct.

OWNER(S) OF RECORD LACOUNTY WATERWORKS DIST NO 4;



PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING:

L A COUNTY WATERWORKS DIST NO 4

DEPT OF PUBLIC WORKS

900 S FREMONT AVE 9TH FL

ALHAMBRA, CA 91803-1331

RECORDATION NO.: G193162 CONTACT PHONE NO.: (628)458-7157

Owner's Designation of Well

NO 38

State Well Number 07N/12W-21F S Parcel Number

DEADLINE: Notices must be received no later than June 30, 2005 in order to be recorded.

REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

If the above information is inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the coming year.

W	ing year.		
1. 2.	TYPE OF DIVERSION Groundwater extraction or Surface diversion OWNERSHIP. Person listed below is:		·
	Owner of land on which well or point of diversion is located, and is extracting/diverting water.	•	
	Lessee of land on which well or point of diversion is located, and is extracting/diverting water.		⊠ acre-feet
	Owner of land, but lessee is extracting/diverting water.	728,61	Cubic-feet
	Other: Please explain:	(Must be a specific number)	☐ galions
3.	AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR		Banone
4.	AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR		□ acre-feet
5.	METHOD OF MEASUREMENT Water Meter Nonmetered or Estimated		□ cubic-feet
6.	TYPE OF WATER USE Agricultural Domestic or Municipal Other:	Annual quantity	☐ gaffons
		Season of diversion	- Aastolia
7.	ACTION REQUESTED:	Begin	
	Close this file. (Files may be reopened at any time – fee required)	End	
	Recurd my water use. (Fee required)	Maximum rate of diversion	
	Do not record my water use but keep my name on mailing list. (No fee required)		
	Transfer this file to:		
	(NEW OWNER'S FIRST NAME) (M. NAME)	(LAST NAME)	· · · · · ·
	Company Name:		
	Address:		. ,
	(MAILING ADDRESS) Telephone: () Effective Date:	(CITY) (STATE)	(ZIP CODE)
	Totophone: { }Etteotive Date		

8. SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new land irrigation, new method of irrigation, etc.) or any other comments

9. CERTIFICATION AND SIGNATURE A CONTROL that the forgoing s	statements are true and	correct to the best of my knowledge.	
Signature: Will W. Ollun		Date 06/28/05	
Printed Name PAVIP	W.	PEDERSEN	
Company Name: 4 (FIRST NAME)	(M. NAME)	(LAST NAME	
THIS SPACE FOR OFFICE USE ONLY		R	AMT: D

PLEASE COMPLETE. SUBMIT THE ORIGINAL JAND MAKE'A COPY FOR YOUR RECORDS State of California, State Water Resources Control Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000

Info: (916) 341-5300, FAX: (916) 341-5409, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION



if the owner information below is wrong or missing, please correct. OWNER(S) OF RECORD LACOUNTY WATERWORKS DIST NO 4;

> RECORDATION NO.: G193201 CONTACT PHONE NO.: (828)458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING: L A COUNTY WATERWORKS DIST NO 4 **DEPT OF PUBLIC WORKS**

900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well

WELL NO 41

State Well Number

Parcel Number

07N/10W-19E01 S

DEADLINE: Notices must be received no later than June 30, 2005 in order to be recorded.

REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE REFORE COMPLETING

If th	e above information is inaccurate,	please line it out in rec	and provide current in	formation. Notify this of	ica if ownership or a	ddress change	S occur during the
CON	ning year				-	•	•
1.	TYPE OF DIVERSION (ST		or Surface diversi	on ·			•
2.	OWNERSHIP. Person lister	below is:					
٠ ,	Ovnier of tend on which well or						•
	Lessee of land on which well o	r point of diversion is i	located, and is extractin	g/diverting water.			M acre-feet
	Owner of land, but lessee is ex	dracting/diverting wate	9 r.		18.	λl	And accept open ☐ combin-facet
	Other, Please explain:				Mort ha a se	ncific mirrber)	Despirer
3.	AMOUNT OF GROUNDWAT	ER EXTRACTED D	URING CALENDAR	YEAR	Annual Date of the		ri besit
4.	AMOUNT OF SURFACE WA	TER DIVERTED DL	IRING CALENDAR'	EAR			□ acre-feet
5.	METHOD OF MEASUREMEN	T Water Meder	Power Motor	Nonmetered or Estimated			□ acri+nex □ cobic-feet
6.	TYPE OF WATER USE	•	Comestio or Municipal	Other:	Assemi quantity		□ gallens
		•			Sesson of Everylor		_ L PROIS
7.	ACTION REQUESTED:				Begia		
	Close this file. (Files may	be reopened at any t	ime – fee required)		Equi_		
	Record my water use. (Fee	required)			Maximum rate of d	WITHER	'
	Do not record my water use	but keep my name on	mailing list. (No fee re	quired)		.,,=	
	Transfer this file to:						
		ARCHI CMARCOTO D	TRST NAME)	(M. NAME)	<u> </u>	AST NAME)	
		haru cunanto.					
	Company Name:	hen owers.		<u> </u>		 .	-
					· · ·		,
			ADDRESS)		(CITY)	(STATE)	, (ZIP CODE)
	Company Name: Address: Telephone: ()	(MAILING)	ADDRESS)	e:	(CITY)	(STATE)	(ZIIP COODE)
R	Address:	(MAILING /	ADDRESS) Effective Da	e:	(СПУ)		
8.	Address:	(MAILING /	ADDRESS) Effective Da	e:	(СПУ)		
	Address: Telephone: () SUPPLEMENTAL INFORMAT	(MAILING) FION. Please list any d	ADDRESS) Effective Da hanges in your project sin	e: se last year (new pump, cer	(CTTY) w land integration, new r	nethod of irrigation	
	Address:	(MAILING) TION. Please Retainy of TURE: Logged that	ADDRESS)Effective Da hanges in your project sin	e: se last year (new pump, cer	(CTTY) w land integration, new r	nethod of irrigation	
9.	Address: Telephone: () SUPPLEMENTAL INFORMAT CERTIFICATION AND SIGNA	(MAILING) TION. Please Retainy of TURE: Logged that	ADDRESS)Effective Da hanges in your project sin	e:	(CTTY) If land integration, new relationships the least of my known	nethod of irrigation	
9.	Address: Telephone: () SUPPLEMENTAL INFORMAT	(MAILING) FION. Please list any d	ADDRESS)Effective Da hanges in your project sin	e:	(CTTY) w land integration, new r	nethod of irrigation	
9. Sigr	Address: Telephone: () SUPPLEMENTAL INFORMAT CERTIFICATION AND SIGNA	(MAILING) TION. Please fist any of	ADDRESS) Effective Da hanges in your project sin the forgoing statements	e:	(CTTY) If land integration, new relationships the least of my known	nethod of irrigation	

GW-ANN-EXTRT (1-05)

THE SPACE FOR OFFICE USE ONLY

Company Name:

PLEASE COMPLETE. SUBMIT THE ORIGIN. AND MAKE A COPY FOR YOUR RECORDS*** State of California, State Water Resources Control Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.watertights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

if the owner information below is wrong or missing, please correct. OWNER(S) OF RECORD LA COUNTY WATERWORKS DIST NO 4;



PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING: L A COUNTY WATERWORKS DIST NO 4 **DEPT OF PUBLIC WORKS** 900 S FREMONT AVE 9TH FL

ALHAMBRA, CA 91803-1331

RECORDATION NO.: G193249 CONTACT PHONE NO.: (628)458-7157

Owner's Designation of Well

GW-ANN-EXTRT (1-05)

State Well Number 07N/12W-27F01 S Parcel Number

DEADLINE: Notices must be received no later than June 30, 2005 in order to be recorded.

REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

If the above information is inaccurate, please line it out in red and provide current information.	Notify this office if ownership or address changes occur during the
coming year.	

coming year.	i is trigocorate, presse fille it c	at in led and provide conter	i montation. Noticy uns	onice ii owietamb or a	ocress changes	occur auring me
	RSION Groundwater extr	action or Surface div	ersion .			
	Person listed below is:		•			
	on which well or point of diver					
	on which well or point of dive but <u>lessee</u> is extracting/diven		cting/diverting water.	137	2.62	Ø-acre-feet □ cubic-feet
	explain:			[Must be a su	recific number)	gallons
	ROUNDWATER EXTRAC			•		C) gadotro
	URFACE WATER DIVERT		R YEAR	→		□ acre-feet
	EASUREMENT Water A		Nonmetered or Estimate			Cubic-feet
6. TYPE OF WATE	ER USE Agricult	ural Domestic or Municipa	Other:	_ Annual quantity		☐ gallons
7. ACTION REQUI	ERTEN.			Season of diversion	I	
			•	Begin Fnd		
	ile. (Files may be reopened	at any time – tee required	,		iversion	
	vater use. (Eee required)			. 1	<u>-</u>	
	d my water use but keep my i		e requirea)	•		
. Transfer	this file to:	VNER'S FIRST NAME)	(M. NAME)		AST NAME)	
Compan	y Name:	- ·	(INT. INCOME)		TAGE (ANIME)	
Addicas	·	(AILING ADDRESS)		(CITY)	(STATE)	(ZIP CODE)
Telephor	ne: ()	Effective	Date:		, ,	(41. 5552)
8. SUPPLEMENTA	AL INFORMATION. Please	list any changes in your project	since last year (new pump	, new land Infgation, new r	nethod of irrigation	, etc.) or any other commen
9. CERTIFICATION	AND SIGNATURE HOEF	tifethat the forcelog statem	ente are true and cover	to the best of my know	ladaa	
J. January	1. 1/1/1/11	mar the rorgoning statem			euge.	
Signature:	uv m veu		Da	te <i>No 28 0</i>	5	
Printed Name	מו עומל	•	W.	PEDEL	(Ku	••
Littlier Manie	(FIRST NAME)		(M. NAME)	(LAST N		
Company Name:	LA COUNTY		the in the start	(PO) 10		
				· · · · · · · · · · · · · · · · · · ·		

PLEASE COMPLETE. SUBMIT THE ORIGIN. AND MAKE'A COPY FOR YOUR RECORDS*** State of California, State Water Resources Control Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000

Info: (916) 341-5390, FAX: (916) 341-5400, Web: http://www.weteintghts.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION



If the owner information below is wrong or missing, please correct. OWNER(8) OF RECORD LACOUNTY WATERWORKS DIST NO 4;

PRIMARY CONTACT OR ADJENT FOR MAIL & REPORTING: L A COUNTY WATERWORKS DIST NO 4 **DEPT OF PUBLIC WORKS** 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

RECORDATION NO.: G193250 CONTACT PHONE NO.: (626)468-7167

Owner's Designation of Well

State Well Number

Parcel Number

07N/12W-27F02 S

DEADLINE: Notices must be received no later than June 30, 2005 in order to be recorded.

REQUIRED FEES: A filing fee of \$115.09 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not sand cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

If the above info	rmation is inaccurate,	, please line it out in red and	i provide current information.	Notify this office if ownership or address cha	anges occur during the
coming year.			,		

	ning year.	, prease title it out it hed and provide current,	alloritzation. Notify this office	il connership or address changes	occur during the
1. 2.	TYPE OF DIVERSION GOWNERSHIP. Person lists		ilon		•
,	Owner of land on which well	or point of diversion is located, and is extracting	ng/diverting water.		
	Lessee of land on which well	or point of diversion is located, and is extract	ing/diverting water.		25 acre-feet
	Owner of land, but lesses is a	odracting/diverting water.		677.83	Cubit-feet
	Other: Please explain:			(Mast is a specific number)	☐ pallons
3.	AMOUNT OF GROUNDWA	TER EXTRACTED DURING CALENDAR	YEAR '	,	
4.	AMOUNT OF SURFACE WA	ATER DIVERTED DURING CALENDAR	YEAR		□ scre-fact
5.	METHOD OF MEASUREME	NT Water Media: Power Media:	Nonmetered or Estimated		□ cubic-feet
6.	TYPE OF WATER USE	Aditional Comestic or Municipal	Offixer:	Asset quantity	O pelious
				Seesan of diversion	
7.	ACTION REQUESTED:			Begin	
•	Close this file, (Files may	(be reopened at any time - fee required)		End	· ·
	Record my water use. (Fe	e required)		Maximum rate of diversion	
	Do not record my water us	e but keep my name on malling list. (No fee i	required)	-	-
	Transfer this file to:		<u> </u>	<u> </u>	
	•	(NEW OWNER'S FIRST NAME)	(ML NAME)	(LAST NAME)	
	Company Name:				
	Address:	<u> </u>	•		
		(MAILING ADDRESS)		CITY) (STATE)	(ZIP CODE)
	Telephone: ()	Effective D	eie:		

SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new land irrigation, new mathod of irrigation, etc.) or any other comments

9. CERTIFICATION/AND SIGNATURE: / Artify that the forg	oing statements are true and corre	ct to the best of my knowledge.	
Signature: Mul W Felline		Date 06/28/05	
Printed Name DAVID	W.	PEDERSEN	
(FRST MANE)	(M. NAME)	(LAST NAME	
THIS SPACE FOR OFFICE USE ONLY		R	事:

PLEASE COMPLETE. SUBMIT THE ORIGIN -- AND MAKE A COPY FOR YOUR RECORDS State of California, State Water Resources Control Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2009

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct. OWNER(S) OF RECORD LOS ANGELES COUNTY WATERWORKS;



PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING: LOS ANGELES COUNTY WATERWORKS **DISTRICT NO 4** 900 S FREMONT AVE 9TH FL

RECORDATION NO.: G193280 CONTACT PHONE NO.: (626)458-7157

Owner's Designation of Well

ALHAMBRA, CA 91803

State Well Number 07N/12W-09A S

Parcel Number

AMT:

50

DEADLINE: Notices must be received no later than June 30, 2005 in order to be recorded, REQUIRED FEES: A filling fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your

recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

TYPE OF DIVERSION Groundwater extraction or Surface diversion OWNERSHIP. Person listed below is: Owner at land on which well or point of diversion is located, and is extracting/dive	-		
Lessee of land on which well or point of diversion is located, and is extracting/diversion of land, but lessee is extracting/diverting water. Other: Please explain: AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEA	erting water.	\ろを1.08 (Must be a specific number)	Ø acre-feet ☐ cubic-feet ☐ gallons
TYPE OF WATER USE Agricultural Domestic of Municipal Other ACTION REQUESTED: Close this file. (Files may be reopened at any time – fee required) Record my water use. (Fee required)	r: Annus	of quantity	
Do not record my water use but keep my name on mailing list. (No fee require Transfer this file to: (NEW OWNER'S FIRST NAME) Company Name: Address: (MAILING ADDRESS)	(CITY)	(LAST NAME)	(ZiP CODE)
Telephone: () Effective Date: SUPPLEMENTAL INFORMATION. Please list any changes in your project since last		····	

JRE: I certify that the forgoing statements are true and correct to the best of my knowledge. Signature:

Printed Name (M. NAME) (LAST NAME

Company Name:

GW-ANN-EXTRT (1-05)

SUBMIT THE ORIGIN -- AND MAKE A COPY FOR YOUR RECORDS*** ***PLEASE COMPLETE. State of California, State Water Resources Control Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct. OWNER(S) OF RECORD LOS ANGELES COUNTY WATERWORKS;



Parcel Number

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING: LOS ANGELES COUNTY WATERWORKS

900 S FREMONT AVE 9TH FL

DISTRICT NO 4 ALHAMBRA, CA 91803

(LAST NAME

R.

AMT: 👱

RECORDATION NO.: G193281 CONTACT PHONE NO.: (626)458-7157

4-51

Owner's Designation of Well

State Well Number 07N/12W-09C S

DEADLINE: Notices must be received no later than June 30, 2005 in order to be recorded.

REQUIRED FEES: A filling fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

	e above information is inaccurate, please line it out in red and provide current information. Notify this offic ning year.	e if ownership or address changes	s occur during the
1. 2.	TYPE OF DIVERSION Groundwater extraction or Surface diversion OWNERSHIP, Person listed below is:		
-	Owner of land on which well or point of diversion is located, and is extracting/diverting water.		
	Lessee of land on which well or point of diversion is located, and is extracting/diverting water.		
	Owner of land, but lessee is extracting/diverting water.	801.68	🖾 acre-feet
			Cubic-feet
3.	Other: Please explain: AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR	(Must be a specific number)	☐ gallons
ə. 4.	AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR	<u> </u>	
4 . 5.	METHOD OF MEASUREMENT (Water Meter) Power Meter Nonmetered or Estimated		acre-feet
			Cubic-feet
6.	TYPE OF WATER USE Agricultural Domestic or Municipal Other.	Annual quantity Season of diversion	_ 🔲 gallons
7.	ACTION REQUESTED:	Begin ·	
••	Close this file. (Files may be reopened at any time – fee required)	End	
	Record my water use. (Fee required)	Maximum rate of diversion	
		·	<u></u>
	Do not record my water use but keep my name on mailing list. (No fee required)		
	Transfer this file to:	(LAST NAME)	
	(NEW OWNER'S FIRST NAME) (M. NAME) Company Name:	(CAST IANNE)	•
	Company Name.	•	
	Address:		
	(MAILING ADDRESS)	(CITY) (STATE)	· (ZIP CODE)
	Telephone: () Effective Date:		
8.	SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new	land imigation, new method of imigation	on, etc.) or any other commen
			······································
9.	CERTIFICATION AND SIGNATURE: I conjety that the forgoing statements are true and correct to the	e best of my knowledge.	
٥.	No of we helpe	سالاها ا	
Sig	nature: Will W. (Pellin Date_	00/28/05	
•	HAMIN	PEDERSEN	
Pri	nted Name DAVID W.	IFUNDANO	

(M. NAME)

THIS SPACE FOR OFFICE USE ONLY

Company Name:

(FIRST NAME)

PLEASE COMPLETE. SUBMIT THE ORIGINAL AND MAKE A COPY FOR YOUR RECORDS State of California, State Water Resources Control Board, Division of Water Rights P.O. BOX 2000, 8ACRAMENTO, CA 95812-2000

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterfights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct. OWNER(8) OF RECORD LOS ANGELES COUNTY WATERWORKS;



PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING: LOS ANGELES COUNTY WATERWORKS **DISTRICT NO 4** 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803

RECORDATION NO.: G193282 CONTACT PHONE NO.: (828)458-7167

Owner's Designation of Well

4-54

State Well Number 07N/11W-20K S

Parcel Number

DEADLINE: Notices must be received no later than June 30, 2005 in order to be recorded.

REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

OF EASE DEAD THE GENERAL INCOMMATION ON THE BENEROES OFFE RECORD COMMETTING THIS MOTION

TYPE OF DIVERSION Groundway OWNERSHIP. Person listed belo Owner of land on which well or point	ter extraction or Surface diversion write: of diversion is located, and is extracting/diverting	water.		
	of diversion is located, and is extracting/diverting			Ø ocro-fes
Owner of land, but lessee is extracting	g/diverting water.	እ 5	E.10	☐ cabic-fe
Other: Please explain:		(Mast be as	pecific number)	
	CTRACTED DURING CALENDAR YEAR			
	DIVERTED DURING CALENDAR YEAR	 →		☐ acre-fee
METHOD OF MEASUREMENT (Water Meter Noometer	d or Estimated		🖸 cubic-fee
TYPE OF WATER USE	Agricultural Classeadc or Municipal Other:	Asset quentity_		☐ gellons
. CTOU DEALIFORM		Spenson of alwaysis		
ACTION REQUESTED:		Begin End	·	
	period at any fime – fee required)	Maximum rate of	deceler	
Record my water use. (Fee requir				
	sep my name on snalling list. (No fee required)	•		•
Transfer this file to:	NEW OWNER'S FIRST NAME) (#	A. NAME)	# 4 COT 114 4 4 CT	
^	NEW OWNER'S PROST NAME) (I	n. NAMIC)	(LAST NAME)	
company manon	 -	······································		
Address:	<u></u>	·		
	(MAILING ADDRESS)	(CITY)	(STATE)	(ZIP CODE)
APP II A S	Eff. 0. 6.1			
Tetaphone: ()	Effective Date:			•
		/new room new fund introller now	mathed of introller	n airs) ar anns afhas ar
	Effective Date: Please ist any changes in your project since last year	(new pump, new land intigation, new	method of intgation	n, etc.) or any other ox
SUPPLEMENTAL INFORMATION.	Please list any changes in your project since last year		 -	n, etc.) or any other or
SUPPLEMENTAL INFORMATION.			 -	n, eic.) or any other o
SUPPLEMENTAL INFORMATION. CERTIFICATION AND STONATURE	Please list any changes in your project since last year	and correct to the best of my know	 -	n, etc.) or any other o
SUPPLEMENTAL INFORMATION. CERTIFICATION AND STONATURE	Please list any changes in your project since last year		 -	n, etc.) or any other or
SUPPLEMENTAL INFORMATION.	Please list any changes in your project since last year	and correct to the best of my know	 -	n, etc.) or any other o

PLEASE COMPLETE. SUBMIT THE ORIGIN. AND MAKE A COPY FOR YOUR RECORDS
State of California, State Water Resources Control Board, Division of Water Rights
P.O. BOX 2000, SACRAMENTO, CA 95812-2000

G193283%G%2004

2004

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct.

OWNER(S) OF RECORD LOS ANGELES COUNTY WATERWORKS;

RECORDATION NO.: G193283 CONTACT PHONE NO.: (626)458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING:
LOS ANGELES COUNTY WATERWORKS
DISTRICT NO 4
900 S FREMONT AVE 9TH FL
ALHAMBRA, CA 91803

Owner's Designation of Well

4-55

State Well Number 07N/11W-20K S

Parcel Number

DEADLINE: Notices must be received no later than June 30, 2005 in order to be recorded,

REQUIRED FEES: A filling fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

If the above information is inaccurate, please line it out in red and provide current information. Notify this office if ownership or address changes occur during the coming year.

Costain Year.		
TYPE OF DIVERSION Groundwater extraction or Surface diversion OWNERSHIP. Person listed below is:		
Owner ut land on which well or point of diversion is located, and is extracting/diverting water.		
Lessee of land on which well or point of diversion is located, and is extracting/diverting water. Owner of land, but lessee is extracting/diverting water. Other: Please explain:	2016.85	Date feet Cubic-feet Date
3. AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR		· · · · · · · · · · · · · · · · · · ·
4. AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR		acre-feet
5. METHOD OF MEASUREMENT Water Meter Power Meter Nonmetered or Estimated	į.	Cubic-feet
6. TYPE OF WATER USE Agricultural Portfestic or Municipal Other:	Annual quantity Season of diversion	□ gallons
7. ACTION REQUESTED:	Begin	
Close this file. (Files may be reopened at any time - fee required)	End	
Record my water use. (Fee required)	Maximum rate of diversion	
Do not record my water use but keep my name on mailing list. (No fee required)	·	
Transfer this file to:		
(NEW OWNER'S FIRST NAME) (M. NAME) Company Name:	(LAST NAME)	
Address:		
	(CITY) (STATE)	(ZIP CODE)
Telephone: () Effective Date:		
SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new l	land infgation, new method of infgatio	n, etc.) or any oil

Printed Name PROFESTEN

(FIRST NAME) (M. NAME) (LAST NAME)

Company Name: LA COVNTY

THIS SPACE FOR OFFICE USE ONLY

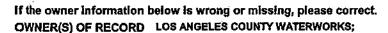
(M. NAME) (LAST NAME

AMT:

ASE COMPLETE. SUBMIT THE ORIGINAL AND MAKE A COPY FOR YOUR RECORDS

State of California, State Water Resources Control Board, Division of Water Rights *PLEASE COMPLETE. P.O. BOX 2000, SACRAMENTO, CA 95812-2000

Info: (916) 341-5390, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION





RECORDATION NO.: G193284 CONTACT PHONE NO.: (626)458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING: LOS ANGELES COUNTY WATERWORKS

DISTRICT NO 4 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803

Owner's Designation of Well

4-58

State Well Number

Parcel Number

AMT: s

07N/11W-18R S

DEADLINE: Notices must be received no later than June 30, 2005 in order to be recorded.

REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE B the above information is inaccurate, please line it out in red and provide current information. Notify this		
oming year.	chice if ownership of address change:	s occur dening lite
. TYPE OF DIVERSION Groundwater extraction or Surface diversion		
. OWNERSHIP. Person listed below is:		
Owner of land on which well or point of diversion is located, and is extracting/diverting water.		
Lessee of land on which well or point of diversion is located, and is extracting/diverting water.	<u> </u>	
Owner of land, but lessee is extracting/diverting water.	1393,93	i⊠ acre-feet □ cubic-feet
Other, Please explain:	(Must be a specific number)	Li cudic-reet
AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR	fixings on a shacing exquiper)	
AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR	> [☐ acre-feet
METHOD OF MEASUREMENT Water Meter Power Meter Nonmetered or Estimate	ed:	Cubic-feet
. TYPE OF WATER USE Agricultural Domestic or Municipal Other:	Annual quantity	□ gafkıns
	Season of diversion	
ACTION REQUESTED:	Begin	
Close this file. (Files may be reopened at any time – fee required)	End Maximum rate of diversion	
Record my water use. (Fee required)	Maximin Late of postsion	
Do not record my water use but keep my name on mailing list. (No fee required)	1	
Transfer this file to:	•	
(NEW OWNER'S FIRST NAME) (M. NAME)	(LAST NAME)	
Company Name:		
Address:		•
(MAILING ADDRESS)	(CITY) (STATE)	(ZIP CODE)
Telephone: () Effective Date:		
SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump,	new land irrigation, new method of irrigation	n, etc.) or any other com
		
CERTIFICATION AND STENATURE: I certify that the forgoing statements are true and correct	to the best of my knowledge.	•
CERTIFICATION AND STENATURE: I certify that the forgoing statements are true and correct	to the best of my knowledge.	·
CERTIFICATION AND STENATURE: I certify that the forgoing statements are true and correct gnature: Date of the property of the	משינו לומבא ממ	·
CERTIFICATION AND STENATURE: I certify that the forgoing statements are true and correct gnature:	משינו לומבא ממ	

PLEASE COMPLETE, SUBMIT THE ORIC. 1 AND MAKE A COPY FOR YOUR RECORDS State of California, State Water Resources Control Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct. OWNER(S) OF RECORD LOS ANGELES COUNTY WATERWORKS;



PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING: LOS ANGELES COUNTY WATERWORKS **DISTRICT NO 4** 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803

RECORDATION NO.; G193285 CONTACT PHONE NO.: (626)458-7157

Owner's Designation of Well

4-59

State Well Number 07N/11W-18R S

Parcel Number

DEADLINE: Notices must be received no later than June 30, 2005 in order to be recorded.

REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVI	<u>ERSE SIDE BEFORE COMPL</u>	<u>.ETING THIS NOT</u>	<u>ice</u>
If the above information is inaccurate, please line it out in red and provide current information	оп. Notify this office if ownership	or address changes	occur during the
coming year.			
TYPE OF DIVERSION Groundwater extraction or Surface diversion			••
2. OWNERSHIP. Person listed below is:			
Owner of land on which well or point of diversion is located, and is extracting/divert			
Lessee of land on which well or point of diversion is located, and is extracting/diver	ting water.		☑ acre-feet
Owner of land, but lessee is extracting/diverting water.	N	58.00	☐ cubic-feet
Other: Please explain:	(Muset he	e a specific number)	gallons
3. AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR			4-1418
4. AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR			☐ acre-feet
	tered or Estimated		☐ cubic-feet
6. TYPE OF WATER USE Agricultural Domaestic or Municipal Other:	Annual quantit	ty	. 🖸 gallons
	Season of dive	ersion	
7. ACTION REQUESTED:	ļ	legin	
Close this file. (Files may be reopened at any time – fee required)		nd of diversion	
Record my water use. (Fee required)	. [OI UITEISIUU	
Do not record my water use but keep my name on mailing list. (No fee required)		
Transfer this file to:			
Transfer this file to:(NEW OWNER'S FIRST NAME)	(M. NAME)	(LAST NAME)	•
Company Name:		····	
Address:			
(MAILING ADDRESS)	(CITY)	(STATE)	(ZIP CODE)
Telephone: () Effective Date:			
O CHOOL PROPERTY INCODERTION			•
B. SUPPLEMENTAL INFORMATION. Please list any changes in your project since last y	ear (new pump, new land inigation, n	ew method of infgation	, etc.) or any other comme
	•		
9. CERTIFICATION AND SIGNATURE certify that the forgoing statements are true	te and correct to the hest of my ki	nowiedae	•
Signature: WWW. W. Vellum	Date	<u>'5</u>	
77.4 • • • •			
Printed Name VAVID	PEDERS		
(FIRST NAME) (M. NAME)	(LAS	T NAME	
Company Name: COV NTY			
THIS SPACE FOR OFFICE USE ONLY		R. /	AMT:

PLEASE COMPLETE. SUBMIT THE ORIG. L AND MAKE A COPY FOR YOUR RECORDS

State of California, State Water Resources Control Board, Division of Water Rights

P.O. BOX 2000, SACRAMENTO, CA 95812-2000

info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct.

OWNER(S) OF RECORD L A COUNTY WATERWORKS DIST NO 4;



PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING:

L A COUNTY WATERWORKS DIST NO 4

DEPT OF PUBLIC WORKS

900 S FREMONT AVE 9TH FL

ALHAMBRA, CA 91803-1331

RECORDATION NO.: G193397 CONTACT PHONE NO.: (626)458-7157

Owner's Designation of Well

60

State Well Number

Parcel Number

07N/12W-17F02 S

3153-015-953

DEADLINE: Notices must be received no later than June 30, 2005 in order to be recorded.

REQUIRED FEES: A filling fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFO	RE COMPLETING THIS	NOTICE
te above information is inaccurate, please line it out in red and provide current information. Notify this office		
ning year.	·	- •
TYPE OF DIVERSION Groundwater extraction or Surface diversion OWNERSHIP. Person listed below is:		•
Owner of land on which well or point of diversion is located, and is extracting/diverting water.	,	
Lessee of land on which well or point of diversion is located, and is extracting/diverting water.		- A acre-feet
Owner of land, but lessee is extracting/diverting water.	1175,81	
Other, Please explain:	(Must be a specific number	
AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR	L	, Sunotio
AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR	* (□ acre-feet
METHOD OF MEASUREMENT Water Meter Power Meter Nonmetered or Estimated		🗆 cubic-feet
TYPE OF WATER USE Agricultural Domestic or Municipal Other:	Annual quantity	D gallons
A ATION DE OMESTED	Season of diversion	
ACTION REQUESTED:	Begin End	
Close this file. (Files may be reopened at any time – fee required)	Maximum rate of diversion	
Record my water use. (Fee required)		
Do not record my water use but keep my name on mailing list. (No fee required)		
Transfer this file (o:	# 40T blaker	,
(NEW OWNER'S FIRST NAME) (M. NAME) Company Name:	(LAST NAME)) .
Company Names		
Address:	<u> </u>	
	(CITY) (STATE	(ZIP CODE)
Telephone: () Effective Date:		
SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new l	Isna imiastion, now mathed of ini	ration atc.) or any other comm
- was a memberalise transportation of the process was any countries in Jour project amos 1950 year (filew pump, figw)	eur auforon' nea motion oi sit	gauvii, etc.) or any valet collis

(M. NAME)

GW-ANN-EXTRT (1-05)

THIS SPACE FOR OFFICE USE ONL'

Company Name:

Signature:

Printed Name

Harel W.

PLEASE COMPLETE. SUBMIT THE ORIG. IL AND MAKE A COPY FOR YOUR RECORDS State of California, State Water Resources Control Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA \$5812-2008

info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrighta.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct. OWNER(8) OF RECORD LA COUNTY WATERWORKS DIST NO 24;



PRIMARY CONTACT OR AGENT FOR MAIL & REFORTING: LA COUNTY WATERWORKS DIST NO 24 **DEPT OF PUBLIC WORKS** 900 S FREMONT AVE 9TH FL

RECORDATION NO.: G182727 CONTACT PHONE NO.: (818)458-7156

ALHAMBRA, CA 91803-1331

Owner's Designation of Well

NO 4

State Well Number 05N/10W-10E S

Percel Number

DEADLINE: Notices must be received no later than June 30, 2005 in order to be recorded.

REQUIRED FEES: A fiting fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

	e above information is inaccurate, please line it out in red and provide current information. Notify this offic	ce if ownership or address change	s occur during the
1.	The state of the s	•	
2.	OWNERSHIP. Person listed below is:		
	Extract of taind on which well or point of diversion is located, and is extracting/diverting water.		
	Lessee of land on which well or point of diversion is located, and is extracting/diverting water.		2 acrefeet
	Owner of land, but lessee is extracting/diverting water.	113.73	Cubic feet
	Other: Please explain:	(Must be a specific number)	
3.			
4.	AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR		acra-feat
5.	METHOD OF MEASUREMENT (Water Meter) Power Meter Norumetered or Estimated		☐ cutile-feet
6.	TYPE OF WATER USE Agricultural Demonstic or Municipal Other:	Asmosi quantity	☐ gallons
7.	ACTION REQUESTED:	Season of diversion Begin	
	Close this the (Files may be reopened at any time - fee required)	End_	
<	Racord my water use. (Fee required)	Maximum rate of diversion	
	Do not record my water use but keep my name on mailing list. (No fee required)		
	Transfer this file to:		
	(NEW OWNER'S FIRST NAME) (M. NAME) Company Name:	(LAST NAME)	
	Address:		· .
	. (MAILING ADDRESS)	(CITY) (STATE)	(ZIP CODE)
	Telephone: () Effective Date:		•
	CURRENTAL INCORNATION Processing and the second of the sec		

9. CERTIFICATION AND SIGNATURE: I copy) that the forgoing	statements are true and	d correct to the best of my knowledge.	
Signature: March W. (Fellin			
Printed Name PAVII)	W.	PEDERSEN	•
(FIRST NAME)	(M. NAME)	(LAST NAME	•
Company Name: LA COVIVIY		R.	澤 : p.

SUBMIT THE ORIG: ____ AND MAKE A COPY FOR YOUR RECORDS*** PLEASE COMPLETE. State of California, State Water Resources Control Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000

2004

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct. OWNER(S) OF RECORD LA COUNTY WATERWORKS DIST NO 24;

RECORDATION NO.: G193396 CONTACT PHONE NO.: (818)458-7156

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING: **LA COUNTY WATERWORKS DIST NO 24 DEPT OF PUBLIC WORKS** 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's	Designation	of	Well

NO. 5

State Well Number

05N/10W-09H01 S

Parcel Number

3046-027-902

DEADLINE: Notices must be received no later than June 30, 2005 in order to be recorded.

REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

	ne above information is inaccurate, please line it out in red and provide current information. Notiny this onli	ce it ownersnip or address changes o	occur during the
COI	ming year,		
1.	TYPE OF DIVERSION Groundwater extraction or Surface diversion		
2.	OWNERSHIP. Person listed below is:		
	Owner of land on which well or point of diversion is located, and is extracting/diverting water.	_	1
(Lessee of land on which well or point of diversion is located, and is extracting/diverting water.	· · · · · · · · · · · · · · · · · · ·	
		163.47	🗷 acra-feet
	Owner of land, but lessee is extracting/diverting water.	\ <u>\</u> \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	🛘 cubic-feet
	Other, Please explain:	(Must be a specific number)	🖸 gallons
3.	AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR		
4.	AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR	,	🗆 acre-feet
5.	METHOD OF MEASUREMENT Water Meter Power Meter Nonmetered or Estimated	,	Cubic-feet
6.	TYPE OF WATER USE Agricultural Domestic or Municipal Other:	Account comments.	— -
v.	11FL OF FFATER DOL AGRANGED POPULATION OF THE PROPERTY OF THE	Annual quantity Season of diversion	🗆 gallons
7	ACTION REQUESTED:	Begin	
٠.		End	
	Close this file. (Files may be reopened at any time – fee required)	Maximum rate of diversion	
	Record my water use. (Fee required)		
	Do not record my water use but keep my name on mailing list. (No fee required)		
	Transfer this file to:		
	(NEW OWNER'S FIRST NAME) (M. NAME)	(LAST NAME)	
	Company Name:		• •
	Address:		•
	(MAILING ADDRESS)	(CITY) (STATE)	(ZIP CODE)
	Telephone: () Effective Date:		

SUPPLEMENTAL INFORMATION. Please list any changes in your project since last year (new pump, new land Imgation, new method of imgation, etc.) or any other comments

9. CERTIFICATION AND SIGNATURE: I certify that the forgoing statements are true and correct to the best of my knowledge.								
Signature:			Date 06/28/05					
Printed Name	PAVID	W-/	PEDEMENI					
Company Name:	LA COVNTY	(M. NAME)	(LAST NAME					

GW-ANN-EXTRT (1-05)

PLEASE COMPLETE. SUBMIT THE ORIG: L AND MAKE A COPY FOR YOUR RECORDS
State of California, State Water Resources Control Board, Division of Water Rights
P.O. BOX 2000, SACRAMENTO, CA 95812-2000

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov
ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct.

OWNER(S) OF RECORD LA COUNTY WATERWORKS DIST NO 27;



Parcel Number

RECORDATION NO.: G192550 CONTACT PHONE NO.: (626)458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING: L A COUNTY WATERWORKS DIST NO 27 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well

NO 3

				st be received no later				* .
REC				ich Annual Notice of Gr yable to: State Water'i				er should Indicate your
				RMATION ON THE R				
		naccurate, pleas	se line it out in red a	nd provide current infor	mation. Notify this offi	ice if ownership	or address changes	occur during the
1. 2.	ing year. TYPE OF DIVERSI OWNERSHIP. Per	•	vater extraction or ow is:	Surface diversion				
•	Owner of land on w	hich well or poir	it of diversion is loc	aled, and is extracting/o	iverting water.			
	Lessee of land on v Owner of land, but	•		ated, and is extracting/	liverling water.	ī	የዩአ. 3.ኒ	🔀 acce-feet
	Other: Please expl				_	[Must be	e specific number)	all gallons ·
3.				RING CALENDAR Y				
				ING CALENDAR YE	-			. 🔲 acre-feet
	METHOD OF MEAS			/ \	nmetered or Estimated	ĺ		□ cubic-feet
6.	TYPE OF WATER I	JSE	Agricultural D	omestic of Municipal C	ther:	Annual quantit		znolleģ 🗆
7.	ACTION REQUEST	ED.				Season of dive	rsion . egin	
••			eopened at any tin	o – fae ronnired)			cgm id	- , , ·
	Record my water			is – ico redancaj		Maximum rate	of diversion	
				nailing list. (No fee requ	ired).	<u> </u>		
	Transfer this		noop my namo our	monard and free cooled	ouj			
	Transfer time	, iiic (o,	(NEW OWNER'S FIR	ST NAME)	(M. NAME)		(LAST NAME)	-
	Company Na	ame:		<u> </u>				
	محجداليات						•	
•	Address:		(MAILING AD	DRESS)		(CITY)	(STATE)	(ZIP CODE)
	Telephone:	()	. (Effective Date:			(=,	(A.), **E-4/
_			_					
8.	SUPPLEMENTAL I	NFORMATION	N. Please list any cha	inges in your project since	last year (new pump, ne	w land imigation, n	ew method of imigation	n, etc.) or any other commen
	·		· · ·	· · · · · ·		···.		
9.	CERTIFICATION A	ND SIGNATU	RES I ceptly that th	e forgoing statements a	re true and correct to t	the best of my k	nowledge.	
	Mi.	VIVI	Willen.			At last	//~	
Sign	nature: /////		www		Date	00/00/		<u></u>
Print	ted Name	DAVIA	·	· W.		PEDERS	<i>5N</i> .	•
- 1111		(FIRST NAM	E) _	(M. N	AME)	(LAS	TNAME	-,
Com	npany Name: 🖊	COUNT	ry	-		•		•

State Well Number

OENI/40W.07D C

PLEASE COMPLETE. . SUBMIT THE ORIC_ _LAND MAKE A COPY FOR YOUR RECORDS*** State of California, State Water Resources Control Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct. OWNER(S) OF RECORD LOS ANGELES COUNTY WATERWORKS;



PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING: LOS ANGELES COUNTY WATERWORKS **DISTRICT NO 34** 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803

RECORDATION NO.: G193286 CONTACT PHONE NO.: (626)458-7157

(LAST NAME

R.

AMT:

Owner's Designation of Well

34-6

State Well Number

Parcel Number

06N/12W-15H S

DEADLINE: Notices must be received no later than June 30, 2005 in order to be recorded.

REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash,

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

If the above information is inaccurate	e, please line it out in red and	d provide current information.	Notify this office if ownership or address	changes occur during the
coming year.	•	•		. *

Outlot of fault has issued to ex	tracting/diverting water.		637.13	⊠ acre-feet □ cubic-feet
Other: Please explain:	<u> </u>		(Must be a specific number)	□ gallons
•				☐ acre-feet
• •		•		□ cubic-feet
TYPE OF WATER USE	Agricultural Domestic or Municipal	Other:	Annual quantity	gallons ·
ACTION PEOLIESTED				
•	he reamand at any time – for required)		Begin	
		,	Maximum rate of diversion	
		. (wirod)		
Transfer this file to:	but keep my hame on maning itsi. (No lee let	lanca)	•	
	. (NEW OWNER'S FIRST NAME)	(M. NAME)	· (LAST NAME)	
Company Name:	,		(a.c., radius)	
• •				
Address:	(444 NO 1050500)		(OTTA)	(210 0000)
Telephone: ()			(SIAIE)	(ZIP CODE)
retebuone: ()	Ellective Date	· · · · · · · · · · · · · · · · · · ·		•
SUPPLEMENTAL INFORMAT	FION. Please list any changes in your project since	e (ast year (new pump, new l	and iniciation, new method of inicial	tion, etc.) or any other com
SUPPLEMENTAL INFORMAT	ION. Please list any changes in your project since	e fast year (new pump, new l	and imigation, new method of imigal	tion, etc.) or any other cor
	AMOUNT OF GROUNDWATI AMOUNT OF SURFACE WAT METHOD OF MEASUREMEN TYPE OF WATER USE ACTION REQUESTED: Close this file. (Files may.) Record my water use. (Fee Do not record my water use Transfer this file to: Company Name: Address: Telephone: ()	AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR Y AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR Y METHOD OF MEASUREMENT Water Meter Power Meter TYPE OF WATER USE Agricultural Pomestic or Municipal ACTION REQUESTED: Close this file (Files may be reopened at any time – fee required) Besend my water use. (Fee required) Do not record my water use but keep my name on mailing list. (No fee record my water use but keep my name on mailing list. (No fee record my water use) (NEW OWNER'S FIRST NAME) Company Name: Address: (MAILING ADDRESS) Telephone: ()	AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR METHOD OF MEASUREMENT Water Meter Power Meter Nonmetered or Estimated TYPE OF WATER USE Agricultural Pomestic or Municipal Other: Close this file (Files may be reopened at any time – fee required) Record my water use. (Fee required) Do not record my water use but keep my name on mailing list. (No fee required) Transfer this file to: (NEW OWNER'S FIRST NAME) Address: (MAILING ADDRESS) Telephone: ()	AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR METHOD OF MEASUREMENT Water Meter Power Meter Nonmetered or Estimated TYPE OF WATER USE Agricultural correction of Municipal Other: Close this file (Files may be reopened at any time – fee required) Becord my water use. (Fee required) Transfer this file to: (NEW OWNER'S FIRST NAME) (M. NAME) (CITY) (STATE)

(M. NAME)

THIS SPACE FOR OFFICE USE ONLY

Company Name:

(FIRST NAME)

SUBMIT THE ORIG _1 AND MAKE A COPY FOR YOUR RECORDS*** PLEASE COMPLETE. State of California, State Water Resources Control Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2006

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.watertights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct. OWNER(S) OF RECORD LA COUNTY WATERWORKS DIST NO 35;



PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING:

L A COUNTY WATERWORKS DIST NO 35 **DEPT OF PUBLIC WORKS** 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

RECORDATION NO.:	G193380
CONTACT PHONE NO.:	(626)300-3395

(LAST NAME

AMT:

Owner's Designation of Well

WELL 2

State Well Number 06N/09W-04A01 S Parcel Number

3383-9-600

DEADLINE: Notices must be received no later than June 30, 2005 in order to be recorded.

REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

If the above inform	nation is t	naccurate, pleas	e Rine it out in red a	and provide current information.		merahip or address change	
coming year.		· · · · · · · · · · · · · · · · · · ·		•	-		·

1. T		selow is: oint of diversion is located, and is extracti	ng/diverting water.		•
	<u>Lessee</u> of land on which well or <u>Owner</u> of land, but <u>lessee</u> is extr	point of diversion is localed, and is extract	ing/diverting water.	334.97	M acco-feet
	Other: Please explain:	acing-uwa ung wana.		324.96	Carbit:-feet
3 4		R EXTRACTED DURING CALENDAI	R VEAR	(Must be a specific number)	🗆 🖸 gallens
		ER DIVERTED DURING CALENDAR			
	METHOD OF MEASUREMENT		Nonmetered or Estimated		□ acre-feet □ cubic-feet
	YPE OF WATER USE	Agricultural Domestic or Municipal		Annual econtity	O gellens
•				Season of alburation	
7. A	ACTION REQUESTED:		•	Regin	
		reopened at any time – fee required)	•	End Mandaum rate of diversion	
	Record my water use. [Fee r	· · · · · · · · · · · · · · · · · · ·		managed late of Mark 2001	
	•	ut keep my name on mailing list. (No fee	required)		
	Transfer this file to:				
	Company Name:	(NEW OWNER'S FIRST NAME)	(M. NAME)	(LAST NAME)	
	Address:	_			
	7400 ccc	(MAILING ADDRESS)		(CITY) (STATE)	(ZIP CODE)
	Telephone: ()	Effective D	late:	<u> </u>	
	NEODIA	ON Section for the last of the section of the secti			
8. S	OUPPLEMENTAL INFORMATI	ON. Please list any changes in your project s	ince lest year (new pomp, nei	w Jeno krigation, new meanog of lingado	n, etc.) or any owner commer
9. C	ERTIFICATION AND SIGNAT	URE: Martify that the forgoing statemen	its are true and correct to t	he best of my knowledge.	
Signal	Mr.T/W	Ollen	Date	06/28/15	_
•	d Name PAVID		W.	PEDERSEN	
	, (FIRST №		AL NAME)	(LAST NAME	

THIS SPACE FOR OFFICE USE ONLY

Company Name:

PLEASE COMPLETE SUBJET THE ORIG. __ LAND MAKE'A COPY FOR YOUR RECORDS*** State of California, State Water Resources Control Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000

2004

Info: (916) 341-5300, FAX: (916) 341-5400, Web: http://www.wateritghts.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct. OWNER(S) OF RECORD L A COUNTY WATERWORKS DIST NO 38;

> RECORDATION NO.: 9192886 CONTACT PHONE NO.: (826)458-7157

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING: L A COUNTY WATERWORKS DIST NO 38 **DEPT OF PUBLIC WORKS** 900 S FREMONT AVE 9TH FL **ALHAMBRA, CA 91803-1331**

Owner's Designation of Well

WELL NO 1

State Well Number 08N/09W-10 S

Parcel Number

DEADLINE: Notices must be received no later than June 30, 2005 in order to be recorded. REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

	the above information is inaccurate, please line it out in red and provide current information. Notify t ming year.	era curca ii overessiih or sitorate citarides	occur owing the
1. 2.	TYPE OF DIVERSION Groundwater extraction or Surface diversion OWNERSHIP. Person listed below is: Owner of fant on which well or point of diversion is located, and is extracting/diverting water.		
	Lesses of land on which well or point of diversion is located, and is extracting/diverting water. Owner of land, but lesses is extracting/diverting water. Other: Please explain:	979.17	25 acre-feet
3.	AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR	(Mest be a specific number)	
4,	AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR	<u> </u>	□ acre-feet
5.	METHOD OF MEASUREMENT Water Median Power Mother Nonmetered or Esti	mated	Cable-feet
5.	TYPE OF WATER USE Agricultural Comestic or Municipal Office:	Annel quantity Sensor of diversion	☐ gefore
7.	ACTION REQUESTED:	Bagin	•
	Cloge this file. (Files may be reopened at any time – fee required)	End	
	Record my water use. (Fige required)	Maximum rate of diversion	
	Do not record my water use but keep my name on matting list. (No tee required) Transfer this file to:		
-	(NEW OWNER'S FIRST NAME) (M. NAME) Company Name:	(LASTNAME)	
	Address:		
	(MALING ADDRESS)	(CITY) (STATE)	(ZLP CODE)
	Telephone: () Effective Date:		

				· ·	
9. CERTIFICATE	ON AND SIGNATURE: Log tify that the for	going statements are true and con	•		
Signature: <i>All</i>	Wellen		Date 06/28/05		
Printed Name	DAVID	W	PEDEDSEN	, ·	
Company Name: _	LA COUNTY	(M. NAME)	(LAST NAME		
THE SPACE FOR OH	FICE USE ONLY	- an-alieur	F.	AUT-	

PLEASE COMPLETE. SUBMIT THE ORKS. ___ AND MAKE A COPY FOR YOUR RECORDS* State of California, State Water Resources Control Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000

Info: (916) 341-5309, FAX: (916) 341-5400, Web: http://www.waterrights.ca.gov ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION

If the owner information below is wrong or missing, please correct. OWNER(8) OF RECORD L. A COUNTY WATERWORKS DIST NO 38:



PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING: L A COUNTY WATERWORKS DIST NO 3B **DEPT OF PUBLIC WORKS** 900 8 FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

RECORDATION NO.: G183247 CONTACT PHONE NO.: (628)458-7157

Owner's Designation of Well

State Well Number 06N/09W-10Q01 S **Parcel Number**

DEADLINE: Notices must be received no later than June 30, 2005 in order to be recorded.

REQUIRED FEES: A filing fee of \$115.00 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE REFORE COMPLETING THIS MOTICE

If th	e above information to inaccurate, please line it out in red and provide current information. Notify this offic	ce if ownership or address cha	inges occur during the
COLL	ing year.	•	•
1.	TYPE OF DIVERSION Groundwater extraction or Surface diversion	•	•
2.	OWNERSHIP. Person listed below te:		
(Owner of land on which well or point of diversion is located, and is extracting/diverting water.		
	Lesses of land on which well or point of diversion is located, and is extracting/diverting water.		M acre-fast
•	Owner of land, but Jessee is extracting/diverting water.	787.88	☐ cabic-feet
_	Other: Please explain:	Offert be a specific member	
3.	AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR		
4.	AMOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR		☐ scze feet
5.	METHOD OF MEASUREMENT Wither Notes Power Meter Hourselend or Estimated		□ cabic-feet
6.	TYPE OF WATER USE Agricultural Comestic or Municipal Other:	Annual quantity	
_		Seases of electrica	
7.	ACTION REQUESTED:	Begin	
	Close this file. (Files may be reopened at any time - fee required)	End	· ·
<	Record my water use, (Peg required)	Maximum rate of disersion	
	Do not record my water use but keep my name on mailing list. (No fee required)	·	, <u>-</u>
	Trænsfer filis file to:		
	Transfer this file to: (NEW OWNER'S FIRST NAME) (M. NAME) Company Name:	(LAST NAME))
	Address:		
	(MAILING ADDRESS)	(CITY) (STATE) (ZIP CODE)
	Telephone: () Effective Date:	<u> </u>	<u> </u>
В.	SUPPLEMENTAL INFORMATION. Please list any changes in your project since lest year (new pump, new	land Imgation, new method of imp	gation, etc.) or any other comme
9.	CERTIFICATION AND SIGNATURE: I deriffy that the forgoing statements are true and correct to the	e best of my knowledge.	-
Sigr	sature: MMd/W/ Collins	06/28/05	· .
	- 1. · · · ·	Λ	
J. Light	ted Name PRV10 (A. NAME)	RAST NAME	· /

PLEASE COMPLETE. SUBMIT THE ORK AND MAKE'A COPY FOR YOUR RECORDS*** State of California, State Water Resources Control Board, Division of Water Rights P.O. BOX 2000, SACRAMENTO, CA 95812-2000 Info: (916) 341-5300, FAX: (916) 341-5400, Web; http://www.wateirigints.ca.gov

2004

ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION If the owner information below is wrong or missing, please correct.

OWNER(S) OF RECORD L A COUNTY WATERWORKS DIST NO 39:

RECORDATION NO.: G193159 CONTACT PHONE NO.: (818)458-7156

蘣.

ANT:

PRIMARY CONTACT OR AGENT FOR MAIL & REPORTING: L A COUNTY WATERWORKS DIST NO 39 **DEPT OF PUBLIC WORKS** 900 S FREMONT AVE 9TH FL ALHAMBRA, CA 91803-1331

Owner's Designation of Well

NO 1

State Well Number

Parcel Number

00N/01W-31R S

DEADLINE: Notices must be received no later than Jume 30, 2005 in order to be recorded.

REQUIRED FEES: A filing fee of \$115.90 is required for each Annual Notice of Groundwater Extraction and Diversion. Check or money order should indicate your recordation number(s) and be made payable to: State Water Resources Control Board. Do not send cash.

PLEASE READ THE GENERAL INFORMATION ON THE REVERSE SIDE BEFORE COMPLETING THIS NOTICE

ove information is inaccurate, prear.					J	· cood during the
		or Surface o	liverators		,	•
Where of land on which well or	point of diversion is to	cated, and is ext	racting/diverting water.			
					 -	
<u>Owner of land, but tessee</u> is ex	iracting/diverting water	r.		1 1	1831 ·	Ø ecre-feet □ cubic-feet
			•			COMETRAT
OUNT OF GROUNDWAT	ER EXTRACTED D	URING CALEN	DAR YEAR -	- Assert no	e specific names)	U gants
OUNT OF SURFACE WA	TER DIVERTED DU	RING CALEND	AR YEAR			□ acre-fest
THOD OF MEASUREMEN	T Water Modes	Power Meter	Nonmetered or Estimated			☐ cubic-feet
PE OF WATER USE	Agricultural	Domestic or Munici	other:	Assurt quantity	,	
	•			1		
•						
		kne – fee require	rd)			
<u> </u>						
	but keep my name on	mailing lat. (No	fee required)			
Transfer this file to:		·				
Company Name:			(M. NAME)	<u> </u>	(LAST NAME)	
Address:				•		
	(MARLING /	VDDRESS)		(CITY)	(STATE)	(ZIP CODE)
Telephone: ()		Effecti	ve Date:		, ,	
	PE OF DIVERSION error VNERSHIP. Person fisted on which well or essee of land on which well or owner of land, but lessee is explain: IOUNT OF GROUNDWATE HOUNT OF SURFACE WATETHOD OF MEASUREMEN PE OF WATER USE THOM REQUESTED: Close this file. (Files may to Record my water use.) Transfer this file to: Company Name:	PE OF DIVERSION croundwater extraction VNERSHIP. Person firsted below is: Owner of land on which well or point of diversion is it is asses of land on which well or point of diversion is it is asses of land, but tesses is extracting/diverting water other; Please explain: IOUNT OF GROUNDWATER EXTRACTED DIVIDUATED OF MEASUREMENT PE OF WATER USE THOM REQUESTED: Close this file. (Files may be reopened at any the Record my water use but keep my name on Transfer this file to: (NEW OWNERS F.	PE OF DIVERSION croundwater extraction or Surface of WNERSHIP. Person listed thatow is: Owner of land on which well or point of diversion is located, and is extressed of land on which well or point of diversion is located, and is extressed from the land, but lessed is extracting/diverting water. Other: Please explain: IOUNT OF GROUNDWATER EXTRACTED DURING CALEND HOUNT OF SURFACE WATER DIVERTED DURING CALEND THOO OF MEASUREMENT Water Mater Power Meter Person Mater Power Meter Person Mater Power Meter Person Mater Power Meter Person Mater Person Person Mater Person Person Mater Person	PE OF DIVERSION Economister extraction or Surface diversion VNERSHIP. Person fisted below is: Owner of land on which well or point of diversion is located, and is extracting/diverting water. Essee of land on which well or point of diversion is located, and is extracting/diverting water. Owner of land, but lessee is extracting/diverting water. Other: Please explain: IOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR OUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR HOUNT OF SURFACE WATER DIVERTED DURING CALENDAR YEAR THOD OF MEASUREMENT Pater Major Power Meter Nonmetered or Estimated PE OF WATER USE Agricultural Agricultural Operation of Municipal Other: THOM REQUESTED: Close this file. (Files may be reopened at any time – fee required) Record my water use. (Fee required) Do not record my water use but keep my name on mailing list. (No fee required) Transfer this file to: (NEW OWNER'S FIRST NAME) Address: Address:	PE OF DIVERSION Coundwater extraction or Surface diversion VNERSHIP. Person fisted Delow is: Dynar-of land on which well or point of diversion is located, and is extracting/diverting water. Lesses of land on which well or point of diversion is located, and is extracting/diverting water. Dynar-of land, but lesses is extracting/diverting water. Dynar-of land on which well or point of diversion is located, and is extracting/diverting water. Dynar-of land on which well or point of diversion is located, and is extracting/diverting water. Dynar-of land on which well or point of diversion is located, and is extracting/diverting water. Dynar-of land on which well or point of diversion is located, and is extracting/diverting water. Dynar-of land on which well or point of diversion is located, and is extracting/diverting water. Dynar-of land on which well or point of diversion is located, and is extracting/diverting water. Dynar-of land on which well or point of diversion is located, and is extracting/diverting water. Dynar-of land on which well or point of diversion is located, and is extracting/diverting water. Dynar-of land on which well or point of diversion is located, and is extracting/diverting water. Dynar-of land on which well or point of diversion is located, and is extracting/diverting water. Dynar-of land on which well or point of diversion is located, and is extracting/diverting water. Dynar-of land on which well or point of diversion is located, and is extracting/diverting water. Dynar-of land on which well or point of diversion is located, and is extracting/diverting water. Dynar-of land on which water. Dynar-of land on which water. Dynar-of land on which water. Annual quantity Season of diversion is located, and is extracting/diverting water. Dynar-of land	PE OF DIVERSION Councivates extraction or Surface diversion viversion is text and is extracting/diverting water. Support of land on which well or point of diversion is located, and is extracting/diverting water. Support of land on which well or point of diversion is located, and is extracting/diverting water. Diver: Please explain:

that the forgoing statements are true and correct to the best of my knowledge. Signature: N. Printed Name (M. NAME) Company Name:

THIS SPACE FOR OFFICE USE CALL GW-ANN-EXTRT (1-05)