



PALMDALE WATER DISTRICT

2029 East Avenue Q • Palmdale, California 93550 • Telephone (661) 947-4111
Fax (661) 947-8604
www.palmdalewater.org

Board of Directors

LESLIE O. CARTER
Division 1

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Division 4

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Division 5

LAGERLOF, SENEAL, BRADLEY, GOSNEY & KRUSE LLP
Attorneys



June 28, 2001

STATE WATER RESOURCES CONTROL BOARD

Division of Water Rights

P.O. Box 2000

Sacramento, CA 95812-2000

Gentlemen:

Enclosed please find for your records and use Palmdale Water District's Annual Notices of Groundwater Extraction or Diversion of Water for 2000 along with our check no. 30502 in the amount of \$135.00 to cover the filing fee for each of the following notices.

<u>Extraction/ Diversion I.D.</u>	<u>Recordation No.</u>	<u>Extraction/ Diversion I.D.</u>	<u>Recordation No.</u>
2A	G193032	18	G193030
3A	G191752	19	G193031
4A	G193068	20	G193100
5	G192840	21	G193101
6A	G193188	22	G193114
7A	G193203	23A	G193150
8A	G193211	24	G193263
10	G191757	25	G193290
11A	G192347	26	G193293
14A	G190813	30	G193262
15	G192715	32	G193294
16	G192716	33	G193291
17	G192717	35	G193292
		Littlerock Dam	G191758

Sincerely,

ROBERT F. REINHART, Drafter II

RFR/dtd

Enclosures

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.waterrights.ca.gov>

ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION FOR 2000

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

REQUIRED FEES: A filing fee of \$5.00 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.

DEADLINE: Notices must be postmarked no later than **June 30, 2001** in order to be recorded.

Owner of Record: PALMDALE WATER DISTRICT ;

PALMDALE WATER DISTRICT
2029 EAST AVE Q
PALMDALE, CA 93550



Recordation No.: G193032

Password: 04190110013026

Phone Number: (661) 947-4111

Owner's Designation of Well
NO 2-A

State Well Number
06N/11W-19E S

Parcel Number
3022-006-905

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.
☒ Other: Please explain: Holder of easement

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 ☐ Nonmetered or Estimated

6. TYPE OF WATER USE ☐ Agricultural ☒ Domestic or Municipal ☐ Other: _____

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:

(NEW OWNER'S FIRST NAME)

(M. NAME)

(LAST NAME)

Company Name: _____

Address: _____

(MAILING ADDRESS)

(CITY)

(STATE)

(ZIP CODE)

Telephone: () _____

Effective Date: _____

1112.97 ☒ acre-feet
(Must be a specific number) ☐ cubic-feet
☐ gallons

Annual quantity _____ ☐ acre-feet
Season of diversion _____ ☐ cubic-feet
Begin _____ ☐ gallons
End _____
Maximum rate of diversion _____

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

Signature: Dennis D. LaMoreaux

Today's Date June 26, 2001

Printed Name

Dennis

D.

LaMoreaux

(FIRST NAME)

(M. NAME)

(LAST NAME)

Company Name: Palmdale Water District

THIS SPACE FOR OFFICE USE ONLY

R. _____ 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.waterrights.ca.gov>

ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION FOR 2000

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

REQUIRED FEES: A filing fee of \$5.00 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.

DEADLINE: Notices must be postmarked no later than **June 30, 2001** in order to be recorded.

Owner of Record: PALMDALE WATER DISTRICT ;

PALMDALE WATER DISTRICT

2029 EAST AVE Q

PALMDALE, CA 93550



Recordation No.: G191752

Password: 04190110013026

Phone Number: (661) 947-4111

Owner's Designation of Well

WELL NO 3 A

State Well Number

06N/11W-19E S

Parcel Number

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.
☒ Other: Please explain: Holder of easement

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 ☐ Nonmetered or Estimated

6. TYPE OF WATER USE

☐ Agricultural ☒ Domestic or Municipal ☐ Other: _____

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:

(NEW OWNER'S FIRST NAME)

(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 (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: Dennis D. LaMoreaux

Today's Date June 26, 2001

Printed Name Dennis

(FIRST NAME)

D.

(M. NAME)

LaMoreaux

(LAST NAME)

Company Name: Palmdale Water District

THIS SPACE FOR OFFICE USE ONLY

R. _____

AMT: _____

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State Water Resources Control Board, Division of Water Rights

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Owner of Record: PALMDALE WATER DISTRICT;

PALMDALE WATER DISTRICT

2029 EAST AVE Q

PALMDALE, CA 93550



Recordation No.: G193068

Password: 04190110013026

Phone Number: (661) 947-4111

Owner's Designation of Well

NO 4-A

State Well Number

06N/11W-19F S

Parcel Number

3022-006-905

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1. TYPE OF DIVERSION

☒ Groundwater extraction or ☐ Surface diversion

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☐ Owner of land, but lessee is extracting/diverting water.

☒ Other: Please explain: Holder of easement

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 ☐ Nonmetered or Estimated

6. TYPE OF WATER USE ☐ Agricultural ☒ Domestic or Municipal ☐ Other: _____

7. ACTION REQUESTED:

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☒ 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: _____

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: I certify that the foregoing statements are true and correct, to the best of my knowledge.

Signature: Dennis D. LaMoreaux

Today's Date June 26, 2001

Printed Name

Dennis

D.

LaMoreaux

(FIRST NAME)

(M. NAME)

(LAST NAME)

Company Name: Palmdale Water District

THIS SPACE FOR OFFICE USE ONLY

R. _____ 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.waterrights.ca.gov>

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Owner of Record: PALMDALE WATER DISTRICT;

PALMDALE WATER DISTRICT

2029 EAST AVE Q

PALMDALE, CA 93550



Recordation No.: G192840

Password: 04190110013026

Phone Number: (661) 947-4111

Owner's Designation of Well

NO 5

State Well Number

05N/12W-02P S

Parcel Number

3053-019-901

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.

☐ Other: Please explain: _____

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 ☐ Nonmetered or Estimated

6. **TYPE OF WATER USE** ☐ Agricultural ☒ Domestic or Municipal ☐ Other: _____

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: _____

(NEW OWNER'S FIRST NAME)

(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 (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: _____

Today's Date June 26, 2001

Printed Name

Dennis

D.

LaMoreaux

(FIRST NAME)

(M. NAME)

(LAST NAME)

Company Name: Palmdale Water District

THIS SPACE FOR OFFICE USE ONLY

R. _____

AMT: _____

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State Water Resources Control Board, Division of Water Rights

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Owner of Record: PALMDALE WATER DISTRICT ;

PALMDALE WATER DISTRICT
2029 EAST AVE Q
PALMDALE, CA 93550



Recordation No.: G193188

Password: 04190110013026

Phone Number: (661) 947-4111

Owner's Designation of Well
6A

State Well Number
06N/12W-23A01 S

Parcel Number
3022-002-902

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.
☐ Other: Please explain: _____

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 ☐ Nonmetered or Estimated

6. TYPE OF WATER USE ☐ Agricultural ☒ Domestic or Municipal ☐ Other: _____

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: _____

(NEW OWNER'S FIRST NAME)

(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 (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: Dennis D. LaMoreaux

Today's Date June 26, 2001

Printed Name Dennis
(FIRST NAME)

D.
(M. NAME)

LaMoreaux
(LAST NAME)

Company Name: Palmdale Water District

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R. _____ AMT: _____

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State Water Resources Control Board, Division of Water Rights

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DEADLINE: Notices must be postmarked no later than **June 30, 2001** in order to be recorded.

Owner of Record: PALMDALE WATER DISTRICT ;

PALMDALE WATER DISTRICT

2029 EAST AVE Q

PALMDALE, CA 93550



Recordation No.: G193203

Password: 04190110013026

Phone Number: (661) 947-4111

Owner's Designation of Well

7-A

State Well Number

06N/11W-19F01 S

Parcel Number

3022-006-905

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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.

☒ Other: Please explain: Holder of easement

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 ☐ Nonmetered or Estimated

6. TYPE OF WATER USE ☐ Agricultural ☒ Domestic or Municipal ☐ Other: _____

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: _____

(NEW OWNER'S FIRST NAME)

(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 (new pump, new land irrigation, new method of irrigation, etc.) or any other comments.

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

Signature: Dennis D. LaMoreaux

Today's Date June 26, 2001

Printed Name

Dennis

D.

LaMoreaux

(FIRST NAME)

(M. NAME)

(LAST NAME)

Company Name: Palmdale Water District

THIS SPACE FOR OFFICE USE ONLY

R.

AMT:

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State of California

State Water Resources Control Board, Division of Water Rights

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Owner of Record: PALMDALE WATER DISTRICT ;

PALMDALE WATER DISTRICT

2029 EAST AVE Q

PALMDALE, CA 93550



Recordation No.: G193211

Password: 04190110013026

Phone Number: (661) 947-4111

Owner's Designation of Well

8A

State Well Number

06N/11W-19C00 S

Parcel Number

3022-006-905

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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.
☐ Other: Please explain: _____

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 ☐ Nonmetered or Estimated

6. TYPE OF WATER USE ☐ Agricultural ☒ Domestic or Municipal ☐ Other: _____

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☐ 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: _____

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

Signature: _____

Today's Date June 26, 2001

Printed Name

Dennis

D.

LaMoreaux

(FIRST NAME)

(M. NAME)

(LAST NAME)

Company Name: Palmdale Water District

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Owner of Record: PALMDALE WATER DISTRICT ;

PALMDALE WATER DISTRICT

2029 EAST AVE Q

PALMDALE, CA 93550



Recordation No.: G191757

Password: 04190110013026

Phone Number: (661) 947-4111

Owner's Designation of Well

WELL NO 10

State Well Number

06N/11W-20H S

Parcel Number

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

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☐ 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: Holder of easement

3. AMOUNT OF GROUNDWATER EXTRACTED DURING CALENDAR YEAR

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5. METHOD OF MEASUREMENT ☒ Water Meter ☐ Power Meter ☐ Nonmetered or Estimated

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☐ Transfer this file to: _____

(NEW OWNER'S FIRST NAME)

(M. NAME)

(LAST NAME)

Company Name: _____

Address: _____

(MAILING ADDRESS)

(CITY)

(STATE)

(ZIP CODE)

Telephone: () _____

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Signature: Dennis D. LaMoreaux

Today's Date June 26, 2001

Printed Name

Dennis

D.

LaMoreaux

(FIRST NAME)

(M. NAME)

(LAST NAME)

Company Name: Palmdale Water District

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R.

AMT: _____

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ANNUAL NOTICE OF GROUNDWATER EXTRACTION AND DIVERSION FOR 2000

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

REQUIRED FEES: A filing fee of \$5.00 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.

DEADLINE: Notices must be postmarked no later than **June 30, 2001** in order to be recorded.

Owner of Record: PALMDALE WATER DISTRICT ;

PALMDALE WATER DISTRICT

2029 EAST AVE Q

PALMDALE, CA 93550



Recordation No.: G192347

Password: 04190110013026

Phone Number: (661) 947-4111

Owner's Designation of Well

WELL NO 11-A

State Well Number

06N/12W-24F S

Parcel Number

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.
☐ Other: Please explain: _____

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 ☐ Nonmetered or Estimated

6. TYPE OF WATER USE ☐ Agricultural ☒ Domestic or Municipal ☐ Other: _____

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: _____

(NEW OWNER'S FIRST NAME)

(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 (new pump, new land irrigation, new method of irrigation, etc.) or any other comments.

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

Signature: _____

Today's Date June 26, 2001

Printed Name

Dennis

D.

LaMoreaux

(FIRST NAME)

(M. NAME)

(LAST NAME)

Company Name: Palmdale Water District

THIS SPACE FOR OFFICE USE ONLY

R.

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.waterrights.ca.gov>

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Owner of Record: PALMDALE WATER DISTRICT ;

PALMDALE WATER DISTRICT

2029 EAST AVE Q

PALMDALE, CA 93550



Recordation No.: G190813

Password: 04190110013026

Phone Number: (661) 947-4111

Owner's Designation of Well

WELL NO 14 A

State Well Number

06N/12W-24A S

Parcel Number

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.

☒ Other: Please explain: Holder of easement

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 ☐ Nonmetered or Estimated

6. TYPE OF WATER USE ☐ Agricultural ☒ Domestic or Municipal ☐ Other: _____

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:

(NEW OWNER'S FIRST NAME)

(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 (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: Dennis D. LaMoreaux

Today's Date June 26, 2001

Printed Name

Dennis

D.

LaMoreaux

(FIRST NAME)

(M. NAME)

(LAST NAME)

Company Name: Palmdale Water District

THIS SPACE FOR OFFICE USE ONLY

R. _____

AMT: _____

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State Water Resources Control Board, Division of Water Rights

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

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Owner of Record: PALMDALE WATER DISTRICT ;

PALMDALE WATER DISTRICT
2029 EAST AVE Q
PALMDALE, CA 93550



Recordation No.: G192715

Password: 04190110013026

Phone Number: (661) 947-4111

Owner's Designation of Well
NO 15

State Well Number
06N/12W-13N S

Parcel Number

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:

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☐ 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: _____

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 ☐ Nonmetered or Estimated

6. TYPE OF WATER USE ☐ Agricultural ☒ Domestic or Municipal ☐ Other: _____

7. ACTION REQUESTED:

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☒ 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: _____

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

Signature: _____

Today's Date June 26, 2001

Printed Name

Dennis

D.

LaMoreaux

(FIRST NAME)

(M. NAME)

(LAST NAME)

Company Name: Palmdale Water District

THIS SPACE FOR OFFICE USE ONLY

R.

AMT:

***PLEASE COMPLETE.

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State of California

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

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Owner of Record: PALMDALE WATER DISTRICT ;

PALMDALE WATER DISTRICT

2029 EAST AVE Q

PALMDALE, CA 93550



Recordation No.: G192716

Password: 04190110013026

Phone Number: (661) 947-4111

Owner's Designation of Well

NO 16

State Well Number

05N/11W-05C S

Parcel Number

3052-074-903

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1. TYPE OF DIVERSION

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☐ Owner of land, but lessee is extracting/diverting water.

☐ Other: Please explain: _____

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 ☐ Nonmetered or Estimated

6. TYPE OF WATER USE ☐ Agricultural ☒ Domestic or Municipal ☐ Other: _____

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☐ 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: _____

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

Signature: _____

Today's Date June 26, 2001

Printed Name

Dennis

D.

LaMoreaux

(FIRST NAME)

(M. NAME)

(LAST NAME)

Company Name: Palmdale Water District

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R.

AMT: