

**ARIZONA CORPORATION COMMISSION**  
**UTILITIES DIVISION**

**ANNUAL REPORT MAILING LABEL – MAKE CHANGES AS NECESSARY**

W-03525A  
C-D Oasis Water Company  
1665 10<sup>th</sup> St.  
Douglas, AZ 85607

RECEIVED

SEP 18 2010

ACC UTILITIES DIRECTOR

**ANNUAL REPORT**  
**Water**

**FOR YEAR ENDING**

12	31	2010
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FOR COMMISSION USE

ANN 04	10
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4-12-11

**COMPANY INFORMATION**

Company Name (Business Name) F-D OASIS WATER Co.

Mailing Address 1665-10<sup>th</sup>  
(Street)  
DOUGLAS AZ 85607  
(City) (State) (Zip)

520-364-5140 — —  
Telephone No. (Include Area Code) Fax No. (Include Area Code) Cell No. (Include Area Code)

Email Address —

Local Office Mailing Address SAME  
(Street)  
(City) (State) (Zip)

Local Office Telephone No. (Include Area Code) Fax No. (Include Area Code) Cell No. (Include Area Code)

Email Address \_\_\_\_\_

**MANAGEMENT INFORMATION**

Regulatory Contact:

Management Contact: VERNON CARDWELL OWNER  
(Name) (Title)

1665-10<sup>th</sup> DOUGLAS AZ 85607  
(Street) (City) (State) (Zip)

520-364-5140 — —  
Telephone No. (Include Area Code) Fax No. (Include Area Code) Cell No. (Include Area Code)

Email Address —

On Site Manager: OLIVER BAKER  
(Name)

LA PEÑA LA PEÑA AZ 85606  
(Street) (City) (State) (Zip)

Telephone No. (Include Area Code) Fax No. (Include Area Code) Cell No. (Include Area Code)

Email Address \_\_\_\_\_

**Statutory Agent:** \_\_\_\_\_

(Name)

(Street)

(City)

(State)

(Zip)

Telephone No. (Include Area Code)

Fax No. (Include Area Code)

Cell No. (Include Area Code)

**Attorney:** \_\_\_\_\_

(Name)

(Street)

(City)

(State)

(Zip)

Telephone No. (Include Area Code)

Fax No. (Include Area Code)

Cell No. (Include Area Code)

**Email Address** \_\_\_\_\_

### OWNERSHIP INFORMATION

Check the following box that applies to your company:

**Sole Proprietor (S)**

**C Corporation (C) (Other than Association/Co-op)**

**Partnership (P)**

**Subchapter S Corporation (Z)**

**Bankruptcy (B)**

**Association/Co-op (A)**

**Receivership (R)**

**Limited Liability Company**

**Other (Describe)** \_\_\_\_\_

### COUNTIES SERVED

Check the box below for the county/ies in which you are certificated to provide service:

**APACHE**

**COCHISE**

**COCONINO**

**GILA**

**GRAHAM**

**GREENLEE**

**LA PAZ**

**MARICOPA**

**MOHAVE**

**NAVAJO**

**PIMA**

**PINAL**

**SANTA CRUZ**

**YAVAPAI**

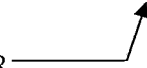
**YUMA**

**STATEWIDE**

COMPANY NAME L-D OASIS WATER CO

**UTILITY PLANT IN SERVICE**

Acct. No.	DESCRIPTION	Original Cost (OC)	Accumulated Depreciation (AD)	O.C.L.D. (OC less AD)
301	Organization	8250 <sup>00</sup>	—	—
302	Franchises	—	—	—
303	Land and Land Rights	INCLUDED IN 301	—	—
304	Structures and Improvements	—	—	—
307	Wells and Springs	—	—	—
311	Pumping Equipment	—	—	—
320	Water Treatment Equipment	NONE	—	—
330	Distribution Reservoirs and Standpipes	NONE	—	—
331	Transmission and Distribution Mains	NONE	—	—
333	Services	NONE	—	—
334	Meters and Meter Installations	INCLUDED IN 301	—	—
335	Hydrants	NONE	—	—
336	Backflow Prevention Devices	INCLUDED IN 301	—	—
339	Other Plant and Misc. Equipment	NONE	—	—
340	Office Furniture and Equipment	NONE @ PRESENT	—	—
341	Transportation Equipment	NONE @ PRESENT	—	—
343	Tools, Shop and Garage Equipment	NONE @ PRESENT	—	—
344	Laboratory Equipment	NONE	—	—
345	Power Operated Equipment	NONE @ PRESENT	—	—
346	Communication Equipment	NONE @ PRESENT	—	—
347	Miscellaneous Equipment	NONE	—	—
348	Other Tangible Plant	NONE	—	—
	<b>TOTALS</b>	8,250 <sup>00</sup>	—	—

This amount goes on the Balance Sheet Acct. No. 108 

COMPANY NAME *C-D OASIS WATER CO*

**CALCULATION OF DEPRECIATION EXPENSE FOR CURRENT YEAR**

Acct. No.	DESCRIPTION	Original Cost (1)	Depreciation Percentage (2)	Depreciation Expense (1x2)
301	Organization			
302	Franchises			
303	Land and Land Rights			
304	Structures and Improvements			
307	Wells and Springs			
311	Pumping Equipment			
320	Water Treatment Equipment			
330	Distribution Reservoirs and Standpipes			
331	Transmission and Distribution Mains			
333	Services			
334	Meters and Meter Installations			
335	Hydrants			
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment			
340	Office Furniture and Equipment			
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	<b>TOTALS</b>			

NO DEPRECIATION THIS YEAR

This amount goes on the Comparative Statement of Income and Expense \_\_\_\_\_  
 Acct. No. 403.

COMPANY NAME *C-ID OASIS WATER CO*

**BALANCE SHEET**

Acct No.	ASSETS	BALANCE AT BEGINNING OF YEAR	BALANCE AT END OF YEAR
<b>CURRENT AND ACCRUED ASSETS</b>			
131	Cash	\$	\$ <i>969.60</i>
134	Working Funds	<i>NONE</i>	<i>NONE</i>
135	Temporary Cash Investments	<i>NONE</i>	<i>NONE</i>
141	Customer Accounts Receivable	<i>NONE</i>	<i>NONE</i>
146	Notes/Receivables from Associated Companies	<i>NONE</i>	<i>NONE</i>
151	Plant Material and Supplies	<i>NONE</i>	<i>NONE</i>
162	Prepayments	<i>NONE</i>	<i>NONE</i>
174	Miscellaneous Current and Accrued Assets	<i>NONE</i>	<i>NONE</i>
	<b>TOTAL CURRENT AND ACCRUED ASSETS</b>	\$	\$ <i>969.60</i>
<b>FIXED ASSETS</b>			
101	Utility Plant in Service	\$ <i>8,250.<sup>00</sup></i>	\$ <i>8,250.<sup>00</sup></i>
103	Property Held for Future Use	<i>INCLUDED W/ 101</i>	<i>INCLUDED W/ 101</i>
105	Construction Work in Progress	<i>NONE</i>	<i>NONE</i>
108	Accumulated Depreciation - Utility Plant	<i>NONE</i>	<i>NONE</i>
121	Non-Utility Property	<i>NONE</i>	<i>NONE</i>
122	Accumulated Depreciation - Non Utility	<i>NONE</i>	<i>NONE</i>
	<b>TOTAL FIXED ASSETS</b>	\$	\$
	<b>TOTAL ASSETS</b>	\$ <i>8,250.<sup>00</sup></i>	\$ <i>8,250.<sup>00</sup></i>

NOTE: The Assets on this page should be equal to Total Liabilities and Capital on the following page.

\* THIS IS NOT A TRUE PICTURE OF ASSETS AS I PAY A GOOD PART OF BILL OUT OF MY PERSONAL ACCOUNT; TO KEEP IT OUT THERE.

COMPANY NAME C-D OASIS WATER CO.

**BALANCE SHEET (CONTINUED)**

Acct. No.		BALANCE AT BEGINNING OF YEAR	BALANCE AT END OF YEAR
	<b>LIABILITIES</b>		
	<b>CURRENT LIABILITIES</b>		
231	Accounts Payable	\$ NONE	\$ NONE
232	Notes Payable (Current Portion)	NONE	NONE
234	Notes/Accounts Payable to Associated Companies	NONE	NONE
235	Customer Deposits	NONE	NONE
236	Accrued Taxes	NONE	NONE
237	Accrued Interest	NONE	NONE
241	Miscellaneous Current and Accrued Liabilities	NONE?	NONE?
	<b>TOTAL CURRENT LIABILITIES</b>	\$	\$
	<b>LONG-TERM DEBT (Over 12 Months)</b>		
224	Long-Term Notes and Bonds	\$ NONE	\$ NONE
	<b>DEFERRED CREDITS</b>		
251	Unamortized Premium on Debt	\$ NONE	\$ NONE
252	Advances in Aid of Construction	NONE	NONE
255	Accumulated Deferred Investment Tax Credits	NONE	NONE
271	Contributions in Aid of Construction	NONE	NONE
272	Less: Amortization of Contributions	NONE	NONE
281	Accumulated Deferred Income Tax	NONE	NONE
	<b>TOTAL DEFERRED CREDITS</b>	\$	\$
	<b>TOTAL LIABILITIES</b>	\$	\$
	<b>CAPITAL ACCOUNTS</b>		
201	Common Stock Issued	\$ NONE	\$ NONE
211	Paid in Capital in Excess of Par Value	NONE	NONE
215	Retained Earnings	NONE	NONE
218	Proprietary Capital (Sole Props and Partnerships)	NONE?	NONE?
	<b>TOTAL CAPITAL</b>	\$	\$
	<b>TOTAL LIABILITIES AND CAPITAL</b>	\$	\$

COMPANY NAME C-ID OASIS WATER CO

**COMPARATIVE STATEMENT OF INCOME AND EXPENSE**

Acct. No.	OPERATING REVENUES	PRIOR YEAR	CURRENT YEAR
461	Metered Water Revenue	\$ 2,057.88	\$ 2,523.95
460	Unmetered Water Revenue	NONE	NONE
474	Other Water Revenues	NONE	NONE
	<b>TOTAL REVENUES</b>	\$ 2,057.88	\$ 2,523.95
	<b>OPERATING EXPENSES</b>		
601	Salaries and Wages	\$ NONE	\$ NONE
610	Purchased Water	0	0
615	Purchased Power	590.38	603.32
618	Chemicals	57.25	44.01
620	Repairs and Maintenance	160.98	609.81
621	Office Supplies and Expense	143.31	916.60
630	Outside Services	2	2
635	Water Testing	200.00	150.00
641	Rents	NONE	NONE
650	Transportation Expenses	2926.06	3,150.00
657	Insurance - General Liability	254.09	1403.00
659	Insurance - Health and Life	NONE	NONE
666	Regulatory Commission Expense - Rate Case	2	2
675	Miscellaneous Expense	46.94	0
403	Depreciation Expense	NONE	NONE
408	Taxes Other Than Income	2	2
408.11	Property Taxes	161.18	132.22
409	Income Tax	NONE	NONE
	<b>TOTAL OPERATING EXPENSES</b>	\$ 7,440.15	\$ 1,009.46
	<b>OPERATING INCOME/(LOSS)</b>	\$ -5382.21	\$ -4485.51
	<b>OTHER INCOME/(EXPENSE)</b>		
419	Interest and Dividend Income	\$ NONE	\$ NONE
421	Non-Utility Income	NONE	NONE
426	Miscellaneous Non-Utility Expenses	NONE	NONE
427	Interest Expense	NONE	NONE
	<b>TOTAL OTHER INCOME/(EXPENSE)</b>	\$ 0	\$ 0
	<b>NET INCOME/(LOSS)</b>	\$ -5,382.21	\$ -4,485.51



COMPANY NAME	C-1) OASIS 40000
Name of System:	ADEQ Public Water System Number:

**WATER COMPANY PLANT DESCRIPTION**

**WELLS**

ADWR ID Number*	Pump Horsepower	Pump Yield (gpm)	Casing Depth (Feet)	Casing Diameter (Inches)	Meter Size (inches)	Year Drilled
621-401	2	25	145'	14"	?	?
621-402	1/2	10	SHALLOW	16"	?	?

\* Arizona Department of Water Resources Identification Number

**OTHER WATER SOURCES**

Name or Description	Capacity (gpm)	Gallons Purchased or Obtained (in thousands)
<del>N</del>		
A		

BOOSTER PUMPS		FIRE HYDRANTS	
Horsepower	Quantity	Quantity Standard	Quantity Other
None			

STORAGE TANKS		PRESSURE TANKS	
Capacity	Quantity	Capacity	Quantity
None			

*Note: If you are filing for more than one system, please provide separate sheets for each system.*

COMPANY NAME C-D OASIS WATER CO  
 Name of System: \_\_\_\_\_ ADEQ Public Water System Number: \_\_\_\_\_

**WATER COMPANY PLANT DESCRIPTION (CONTINUED)**

MAINS		
Size (in inches)	Material	Length (in feet)
2		
3		
4	TRANSITE	296' APPROX
5		
6	TRANSITE	280' APPROX
8		
10		
12		

CUSTOMER METERS	
Size (in inches)	Quantity
5/8 X 3/4	
3/4	
1	
1 1/2	
2	
Comp. 3	
Turbo 3	
Comp. 4	
Turbo 4	
Comp. 6	
Turbo 6	

For the following three items, list the utility owned assets in each category for each system.

TREATMENT EQUIPMENT:  
NONE

STRUCTURES:  
2 PUMP HOUSES 1. SMALL TIN BLDG.  
2. FRAME CORRUGATED TIN BLDG.

OTHER:  
NONE

*Note: If you are filing for more than one system, please provide separate sheets for each system.*

COMPANY NAME: C-D Oaks Water Co  
 Name of System: \_\_\_\_\_ ADEQ Public Water System Number: \_\_\_\_\_

**WATER USE DATA SHEET BY MONTH FOR CALENDAR YEAR 2010**

MONTH	NUMBER OF CUSTOMERS	GALLONS SOLD (Thousands)	GALLONS PUMPED (Thousands)	GALLONS PURCHASED (Thousands)
JANUARY	6	22,650	22,650	
FEBRUARY	6	16,470	16,470	
MARCH	6	16,007	16,007	
APRIL	6	22,850	22,850	
MAY	6	60,070	60,070	
JUNE	6	68,600	68,600	
JULY	6	78,470	78,470	10
AUGUST	6	53,206	53,206	2
SEPTEMBER	6	86,250	86,250	0
OCTOBER	6	68,124	68,124	2
NOVEMBER	7	30,890	30,890	
DECEMBER	7	23,270	23,270	
TOTALS →		746,857	746,850	

What is the level of arsenic for each well on your system? .0061 mg/l  
 (If more than one well, please list each separately.)

If system has fire hydrants, what is the fire flow requirement? N/A GPM for \_\_\_ hrs

If system has chlorination treatment, does this treatment system chlorinate continuously?  
 Yes  No

Is the Water Utility located in an ADWR Active Management Area (AMA)?  
 Yes  No I DON'T KNOW

Does the Company have an ADWR Gallons Per Capita Per Day (GPCPD) requirement?  
 Yes  No (NOT MY KNOWLEDGE)

If yes, provide the GPCPD amount: \_\_\_\_\_

**Note: If you are filing for more than one system, please provide separate data sheets for each system.**

<b>COMPANY NAME:</b>	<i>C-D OASIS Water Co.</i>		
<b>Name of System:</b>	<b>ADEQ Public Water System Number:</b>		

**UTILITY SHUTOFFS / DISCONNECTS**

MONTH		Termination without Notice R14-2-410.B	Termination with Notice R14-2-410.C	OTHER
JANUARY				
FEBRUARY				
MARCH				
APRIL				
MAY		<i>NONE</i>		
JUNE				
JULY				
AUGUST				
SEPTEMBER				
OCTOBER				
NOVEMBER				
DECEMBER				
<b>TOTALS →</b>				

OTHER (description):

*6 ACTIVE CUSTOMERS FOR MOST OF YEAR*

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COMPANY NAME C-D Oasis Water Co YEAR ENDING 12/31/2010

**PROPERTY TAXES**

Amount of actual property taxes paid during Calendar Year 2010 was: \$ 132.72

Attach to this annual report proof (e.g. property tax bills stamped "paid in full" or copies of cancelled checks for property tax payments) of any and all property taxes paid during the calendar year.

If no property taxes paid, explain why. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

VERIFICATION  
AND  
SWORN STATEMENT  
Taxes

RECEIVED  
6/22/11  
ACC UTILITIES DIRECTOR

VERIFICATION

STATE OF Ariz  
I, THE UNDERSIGNED  
OF THE

COUNTY OF (COUNTY NAME)	<u>COCHISE</u>
NAME (OWNER OR OFFICIAL) TITLE	<u>VERNON GARDNER</u>
COMPANY NAME	<u>C-D OASIS WATER CO.</u>

DO SAY THAT THIS ANNUAL UTILITY PROPERTY TAX AND SALES TAX REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

MONTH	DAY	YEAR
<u>12</u>	<u>31</u>	<u>2010</u>

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

I HEREBY ATTEST THAT ALL PROPERTY TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.

I HEREBY ATTEST THAT ALL SALES TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.

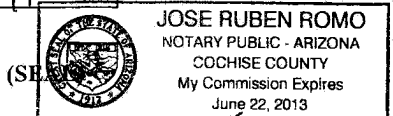
Vernon Gardner  
SIGNATURE OF OWNER OR OFFICIAL

520-364-5740  
TELEPHONE NUMBER

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS 11<sup>PM</sup> DAY OF



COUNTY NAME	<u>Cochise</u>	
MONTH	<u>10:1</u>	<u>2011</u>

[Signature]  
SIGNATURE OF NOTARY PUBLIC

MY COMMISSION EXPIRES 06/22/13

COMPANY NAME P-D OASIS WOOD CO

YEAR ENDING 12/31/2010

INCOME TAXES

For this reporting period, provide the following:

Federal Taxable Income Reported NONE  
Estimated or Actual Federal Tax Liability NONE

State Taxable Income Reported NONE  
Estimated or Actual State Tax Liability NONE

Amount of Grossed-Up Contributions/Advances:

Amount of Contributions/Advances NONE  
Amount of Gross-Up Tax Collected NONE  
Total Grossed-Up Contributions/Advances NONE

Decision No. 55774 states, in part, that the utility will refund any excess gross-up funds collected at the close of the tax year when tax returns are completed. Pursuant to this Decision, if gross-up tax refunds are due to any Payer or if any gross-up tax refunds have already been made, attach the following information by Payer: name and amount of contribution/advance, the amount of gross-up tax collected, the amount of refund due to each Payer, and the date the Utility expects to make or has made the refund to the Payer.

**CERTIFICATION**

The undersigned hereby certifies that the Utility has refunded to Payers all gross-up tax refunds reported in the prior year's annual report. This certification is to be signed by the President or Chief Executive Officer, if a corporation; the managing general partner, if a partnership; the managing member, if a limited liability company or the sole proprietor, if a sole proprietorship. *THERE WERE NO GROSS UP TAX REFUNDS IN PRIOR YEAR OR THIS YEAR.*

Verdon Cardwell  
SIGNATURE

4/5/11  
DATE

VERDON CARDWELL  
PRINTED NAME

OWNER  
TITLE

**VERIFICATION  
AND  
SWORN STATEMENT  
Intrastate Revenues Only**

RECEIVED  
APR 28 2011  
ACC UTILITIES DIRECTOR

**VERIFICATION**

STATE OF ARIZ.  
I, THE UNDERSIGNED  
OF THE

COUNTY OF (COUNTY NAME) <u>COCHISE</u>
NAME (OWNER OR OFFICIAL) TITLE <u>VERNON CARROLL OWNER</u>
COMPANY NAME <u>C-D OASIS WATER CO</u>

**DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION**

**FOR THE YEAR ENDING**

MONTH	DAY	YEAR
12	31	2010

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

**SWORN STATEMENT**

IN ACCORDANCE WITH THE REQUIREMENT OF TITLE 40, ARTICLE 8, SECTION 40-401, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS DURING CALENDAR YEAR 2010 WAS:

Arizona Intrastate Gross Operating Revenues Only (\$) <u>\$ 2,698.00</u>
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(THE AMOUNT IN BOX ABOVE INCLUDES \$ 174.05 IN SALES TAXES BILLED, OR COLLECTED)

**\*\*REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED OR COLLECTED. IF FOR ANY OTHER REASON, THE REVENUE REPORTED ABOVE DOES NOT AGREE WITH TOTAL OPERATING REVENUES ELSEWHERE REPORTED, ATTACH THOSE STATEMENTS THAT RECONCILE THE DIFFERENCE. (EXPLAIN IN DETAIL)**

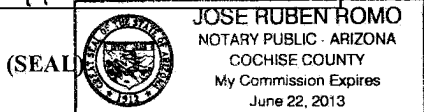
Vernon Carroll  
SIGNATURE OF OWNER OR OFFICIAL  
520-304-5140  
TELEPHONE NUMBER

**SUBSCRIBED AND SWORN TO BEFORE ME**

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS 11<sup>th</sup> DAY OF

COUNTY NAME <u>Cochise</u>
MONTH <u>April</u> .201 <u>1</u>



[Signature]  
SIGNATURE OF NOTARY PUBLIC

MY COMMISSION EXPIRES 06/22/13

**VERIFICATION  
AND  
SWORN STATEMENT  
RESIDENTIAL REVENUE  
Intrastate Revenues Only**

RECEIVED  
APR 18 2011  
ACC UTILITIES DIRECTOR

VERIFICATION

STATE OF ARIZONA

I, THE UNDERSIGNED

OF THE

COUNTY OF (COUNTY NAME) <u>COCHISE</u>	
NAME (OWNER OR OFFICIAL) <u>VERNON GARDNER</u>	TITLE <u>OWNER</u>
COMPANY NAME	

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

MONTH	DAY	YEAR
12	31	2010

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

**SWORN STATEMENT**

IN ACCORDANCE WITH THE REQUIREMENTS OF TITLE 40, ARTICLE 8, SECTION 40-401.01, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS RECEIVED FROM RESIDENTIAL CUSTOMERS DURING CALENDAR YEAR 2010 WAS:

ARIZONA INTRASTATE GROSS OPERATING REVENUES
\$ <u>2,698.00</u>

THE AMOUNT IN BOX AT LEFT INCLUDES \$ 174.05 IN SALES TAXES BILLED, OR COLLECTED)

\*RESIDENTIAL REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED.

Vernon Gardner  
SIGNATURE OF OWNER OR OFFICIAL  
520-364-5740  
TELEPHONE NUMBER

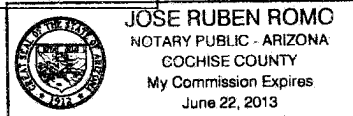
SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS 11<sup>th</sup> DAY OF

(SEAL)

MY COMMISSION EXPIRES 06/22/13



NOTARY PUBLIC NAME <u>Ruben Romo</u>	
COUNTY NAME <u>Cochise</u>	
MONTH <u>April</u>	20 <u>11</u>

[Signature]  
SIGNATURE OF NOTARY PUBLIC