

ARIZONA CORPORATION COMMISSION
UTILITIES DIVISION

ANNUAL REPORT MAILING LABEL – MAKE CHANGES AS NECESSARY

W-03525A

C-D Oasis Water Co.
1665 10th St.
Douglas, AZ 85607

RECEIVED
APR 15 2014
ACC UTILITIES DIRECTOR

ANNUAL REPORT
Water

FOR YEAR ENDING

12	31	2013
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FOR COMMISSION USE

ANN 04	13
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4-17-14

COMPANY INFORMATION

Company Name (Business Name) C-D OASIS WATER CO

Mailing Address 1665-10th
(Street)

DOUGLAS ARIZ. 85607
(City) (State) (Zip)

1-520-364-5140 — —
Telephone No. (Include Area Code) Fax No. (Include Area Code) Cell No. (Include Area Code)

Email Address SAME

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 CARWELL OWNER
(Name) (Title)

1665-10th 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 PLAYA LA PLAYA ARIZ 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 C-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	8250.00	—	—
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	—	—
320.1	Water Treatment Plants	NONE?	—	—
320.2	Solution Chemical Feeders	NONE?	—	—
330	Distribution Reservoirs and Standpipes	NONE	—	—
330.1	Storage Tanks	INCLUDED IN 301	—	—
330.2	Pressure Tanks	INCLUDED IN 301	—	—
331	Transmission and Distribution Mains	INCLUDED IN 301?	—	—
333	Services	—	—	—
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	—	—
340.1	Computers & Software	NONE @ PROFIT	—	—
341	Transportation Equipment	—	—	—
343	Tools, Shop and Garage Equipment	NONE @ PROFIT	—	—
344	Laboratory Equipment	NONE	—	—
345	Power Operated Equipment	INCLUDED IN 301	—	—
346	Communication Equipment	—	—	—
347	Miscellaneous Equipment	NONE @ PROFIT	—	—
348	Other Tangible Plant	NONE	—	—
	TOTALS	8250.00	—	—

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

COMPANY NAME *C-D OAKS 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			
320.1	Water Treatment Plants			
320.2	Solution Chemical Feeders			
330	Distribution Reservoirs and Standpipes			
330.1	Storage Tanks			
330.2	Pressure Tanks			
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			
340.1	Computers & Software			
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			
	TOTALS			

NO DEPRECIATION THIS YEAR

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

COMPANY NAME C-D OATS WATER CO

BALANCE SHEET

Acct No.	ASSETS	BALANCE AT BEGINNING OF YEAR	BALANCE AT END OF YEAR
CURRENT AND ACCRUED ASSETS			
131	Cash	\$ 475.60	\$ 1,600.90
134	Working Funds	NONE	NONE
135	Temporary Cash Investments	NONE	NONE
141	Customer Accounts Receivable	NONE	NONE
146	Notes/Receivables from Associated Companies	NONE	NONE
151	Plant Material and Supplies	NONE	NONE
162	Prepayments	NONE	NONE
174	Miscellaneous Current and Accrued Assets	NONE	NONE
	TOTAL CURRENT AND ACCRUED ASSETS	\$ 475.60	\$ 1,600.90
FIXED ASSETS			
101	Utility Plant in Service	\$ 8,250.00	\$ 8,250.00
103	Property Held for Future Use	INCLUDED IN 10	INCLUDED IN 10
105	Construction Work in Progress	NONE	NONE
108	Accumulated Depreciation - Utility Plant	NONE	NONE
121	Non-Utility Property	NONE	NONE
122	Accumulated Depreciation - Non Utility	NONE	NONE
	TOTAL FIXED ASSETS	\$	\$
	TOTAL ASSETS	\$ 8,250.00	\$ 8,250.00

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 THE COMPANY IS NOT SELF SUPPORTING. I HAVE TO PAY BILLS OUT OF MY POCKET.

COMPANY NAME C-D OASIS WATER CO

BALANCE SHEET (CONTINUED)

Acct. No.		BALANCE AT BEGINNING OF YEAR	BALANCE AT END OF YEAR
LIABILITIES			
CURRENT LIABILITIES			
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
	TOTAL CURRENT LIABILITIES	\$	\$
LONG-TERM DEBT (Over 12 Months)			
224	Long-Term Notes and Bonds	\$ NONE	\$ NONE
DEFERRED CREDITS			
251	Unamortized Premium on Debt	\$ NONE	\$ NONE
252	Advances in Aid of Construction	NONE	NONE
255	Accumulated Deferred Investment Tax Credits 2	NONE	NONE
271	Contributions in Aid of Construction	NONE	NONE
272	Less: Amortization of Contributions ?	NONE	NONE
281	Accumulated Deferred Income Tax ?	NONE	NONE
	TOTAL DEFERRED CREDITS	\$	\$
	TOTAL LIABILITIES	\$	\$
CAPITAL ACCOUNTS			
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
	TOTAL CAPITAL	\$	\$
	TOTAL LIABILITIES AND CAPITAL	\$	\$

I DON'T BELIEVE THIS PAGE APPLIES TO ME AS I ONLY HAVE 7 CUSTOMERS & DON'T DO ANY OF THE ABOVE

COMPANY NAME *C-D OISE WATER CO*

COMPARATIVE STATEMENT OF INCOME AND EXPENSE

Acct. No.	OPERATING REVENUES	PRIOR YEAR	CURRENT YEAR
461	Metered Water Revenue	\$ 1,783.49	\$ 2,436.17
460	Unmetered Water Revenue	NONE	NONE
474	Other Water Revenues	NONE	NONE
	TOTAL REVENUES	\$ 1,783.49	\$ 2,436.17
	OPERATING EXPENSES		
601	Salaries and Wages	\$ NONE	\$ NONE
610	Purchased Water	NONE	NONE
615	Purchased Power	595.92	511.36
618	Chemicals	47.39	523.97
620	Repairs and Maintenance	394.01	432.19
621	Office Supplies and Expense	185.86	179.52
630	Outside Services <i>TELEPHONE</i>	?	804.17
635	Water Testing	125.00	150.00
641	Rents	NONE	NONE
650	Transportation Expenses	3,919.55	2,994.50
657	Insurance - General Liability <i>PLANT</i>	1,375.00	1,375.00
659	Insurance - Health and Life	NONE	NONE
666	Regulatory Commission Expense - Rate Case	?	?
675	Miscellaneous Expense	824.00	491.13
403	Depreciation Expense	NONE	NONE
408	Taxes Other Than Income	?	?
408.11	Property Taxes	143.96	132.48
409	Income Tax	NONE	NONE
	TOTAL OPERATING EXPENSES	\$ 7,608.99	\$ 6,681.34
	OPERATING INCOME/(LOSS)	\$ -5,825.50	\$ -4,245.17
	OTHER INCOME/(EXPENSE)		
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
	TOTAL OTHER INCOME/(EXPENSE)	\$ —	\$ —
	NET INCOME/(LOSS)	\$ -5,825.50	\$ -4,245.17

COMPANY NAME	(-7) OASIS WATER Co
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 1/2	25	146.5	12"	?	?
621-402	1/2	10	82	16'	?	?

* Arizona Department of Water Resources Identification Number

OTHER WATER SOURCES

Name or Description	Capacity (gpm)	Gallons Purchased or Obtained (in thousands)
N		
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 <u>C-D OASIS WATER</u>
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	286' APPROX
8		
10		
12		

CUSTOMER METERS

Size (in inches)	Quantity
5/8 X 3/4	
3/4	12
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 BUILDING
2. FRAME WITH TIN SIDING BLDG

OTHER:

NONE

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

COMPANY NAME: C-D WATER Co (OASIS)

Name of System: ADEQ Public Water System Number:

WATER USE DATA SHEET BY MONTH FOR CALENDAR YEAR 2013

Table with 5 columns: MONTH, NUMBER OF CUSTOMERS, GALLONS SOLD (Thousands), GALLONS PUMPED (Thousands), GALLONS PURCHASED (Thousands). Rows include JANUARY through DECEMBER and a TOTALS row.

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 DO NOT KNOW

Does the Company have an ADWR Gallons Per Capita Per Day (GPCPD) requirement? () Yes (✓) No NOT TO 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.

COMPANY NAME: C-D OASIS WATER Co.
 Name of System: _____ ADEQ Public Water System Number: _____

UTILITY SHUTOFFS / DISCONNECTS

MONTH	Termination without Notice R14-2-410.B	Termination with Notice R14-2-410.C	OTHER
JANUARY			
FEBRUARY			
MARCH			
APRIL			
MAY			
JUNE			
JULY			
AUGUST			
SEPTEMBER			
OCTOBER			
NOVEMBER			
DECEMBER			
TOTALS →			

OTHER (description): NOT SURE WHAT THIS IS.
I HAVE 7 ACTIVE CUSTOMERS THIS YEAR

COMPANY NAME C-D GAS & WATER Co YEAR ENDING 12/31/2013

PROPERTY TAXES

Amount of actual property taxes paid during Calendar Year 2013 was: \$ 132.48

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

APR 15 2014

VERIFICATION

STATE OF _____
I, THE UNDERSIGNED
OF THE

COUNTY OF (COUNTY NAME)	COCHISE	ACC UTILITIES DIRECTOR
NAME (OWNER OR OFFICIAL) TITLE	VERNON CARDOSE	
COMPANY NAME	C-D OASIS WATER CO	

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

FOR THE YEAR ENDING

MONTH	DAY	YEAR
12	31	2013

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 Cardose

SIGNATURE OF OWNER OR OFFICIAL

520-364-7140

TELEPHONE NUMBER

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS

9th

DAY OF April

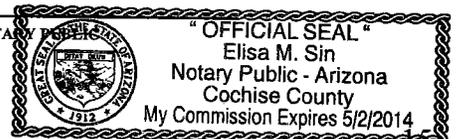
COUNTY NAME	Cochise	
MONTH	April	2014

(SEAL)

MY COMMISSION EXPIRES 5/2/2014

Elisa M. Sin

SIGNATURE OF NOTARY



COMPANY NAME C-D OASIS WATER CO.

YEAR ENDING 12/31/2013

INCOME TAXES

For this reporting period, provide the following:

Federal Taxable Income Reported	<u>NONE</u>
Estimated or Actual Federal Tax Liability	<u>NONE</u>
State Taxable Income Reported	<u>NONE</u>
Estimated or Actual State Tax Liability	<u>NONE</u>

Amount of Grossed-Up Contributions/Advances:

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

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.

Vernon Cordwell
SIGNATURE

3/30/14
DATE

VERNON CORDWELL
PRINTED NAME

OWNER
TITLE

**VERIFICATION
AND
SWORN STATEMENT
Intrastate Revenues Only**

RECEIVED
APR 15 2014

VERIFICATION

STATE OF

I, THE UNDERSIGNED

OF THE

COUNTY OF (COUNTY NAME) <u>COCHISE</u>	ACC UTILITIES DIRECTOR
NAME (OWNER OR OFFICIAL) TITLE <u>VERNON CARDWELL OWNER</u>	
COMPANY NAME <u>C-D CASIO WATER CO</u>	

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

FOR THE YEAR ENDING

MONTH	DAY	YEAR
12	31	2013

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 2013 WAS:

Arizona Intrastate Gross Operating Revenues Only (\$) <u>\$2,436.17</u>
--

(THE AMOUNT IN BOX ABOVE INCLUDES \$ 173.70 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 Cardwell
SIGNATURE OF OWNER OR OFFICIAL
520-364-5140
TELEPHONE NUMBER

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS 9th DAY OF

COUNTY NAME <u>Cochise</u>	
MONTH <u>April</u>	<u>2014</u>

(SEAL)

MY COMMISSION EXPIRES 5/2/2014

[Signature]
SIGNATURE OF NOTARY PUBLIC

 "OFFICIAL SEAL" Elisa M. Sin Notary Public - Arizona Cochise County My Commission Expires 5/2/2014

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

RECEIVED

APR 15 2014

VERIFICATION

ACC UTILITIES DIRECTOR

STATE OF ARIZONA

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

I, THE UNDERSIGNED
OF THE

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

FOR THE YEAR ENDING

MONTH	DAY	YEAR
12	31	2013

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 2013 WAS:

ARIZONA INTRASTATE GROSS OPERATING REVENUES <u>\$ 2,436.17</u>

THE AMOUNT IN BOX AT LEFT
INCLUDES \$ 173.70
IN SALES TAXES BILLED, OR COLLECTED)

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

Vernon Cardell
SIGNATURE OF OWNER OR OFFICIAL

X 520-362-5120
TELEPHONE NUMBER

SUBSCRIBED AND SWORN TO BEFORE ME

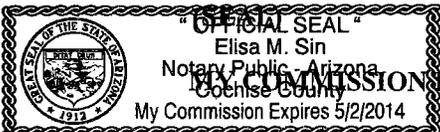
A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS

9th

DAY OF

NOTARY PUBLIC NAME <u>Elisa Sin</u>	
COUNTY NAME <u>Cochise</u>	
MONTH <u>April</u>	.20 <u>14</u>



Elisa Sin
SIGNATURE OF NOTARY PUBLIC