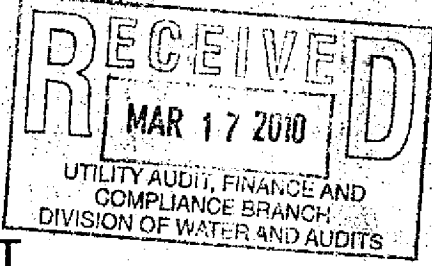


74

Received	_____
Examined	_____

CLASS D
WATER UTILITIES



U# _____

2009
ANNUAL REPORT
OF

LAWANDA M. STANLEY

PINON HILL WATER CO.
(NAME UNDER WHICH CORPORATION, PARTNERSHIP, OR INDIVIDUAL IS DOING BUSINESS)

P.O. BOX 2645, TEHACHAPI, CA 93581
(OFFICIAL MAILING ADDRESS) ZIP

TO THE
PUBLIC UTILITIES COMMISSION
STATE OF CALIFORNIA
FOR THE YEAR ENDED DECEMBER 31, 2009

REPORT MUST BE FILED NOT LATER THAN MARCH 31, 2010

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INSTRUCTIONS

1. Two completed and signed hard copies of this report and one electronic copy must be filed **NOT LATER THAN MARCH 31, 2010**, with:

**CALIFORNIA PUBLIC UTILITIES COMMISSION
DIVISION OF WATER AND AUDITS
ATTN: KAYODE KAJOPAIYE
505 VAN NESS AVENUE, ROOM 3105
SAN FRANCISCO, CALIFORNIA 94102-3298
kok@cpuc.ca.gov**

2. Failure to file the report on time may subject a utility to the penalties and sanctions provided by the Public Utilities Code.
3. The Oath on Page12, must be signed by an authorized officer, partner, or owner.
4. The report must be prepared in ink, typed or computer generated.
5. The report must be filled in, and every question answered. **LEAVE NO SCHEDULE BLANK.** Insert the words "none" or "not applicable" or "n/a" when appropriate.
6. Certain balance sheet and income statement accounts flow to supplemental schedules. The totals of the details in the latter must agree with the balances of the accounts to which they refer.
7. Some schedules provide for a "balance at beginning of year." The amount shown should agree with the "balance at end of year" as shown in the report for the previous year. If there is a difference it should be explained by footnote.
8. When there is insufficient space in a schedule to permit a complete statement of the requested information, insert sheets should be prepared and identified by the number of the schedule to which it refers. Be certain that the inserts are securely attached to the report. If inserts are needed, prepare all inserts in one separate electronic file in Microsoft Excel format and file it with the electronic file of this report.
9. This report must cover the calendar year from January 1, 2009, through December 31, 2009. Fiscal year reports will not be accepted.

CLASS D WATER UTILITIES

(HAVING LESS THAN 500 SERVICE CONNECTIONS)

PINON HILL WATER CO.

(Name under which corporation, partnership or individual is doing business)

P.O. BOX 2645

(Official mailing address)

TEHACHAPI, CA 93581

(Service Area - Town and County)

Telephone Number: (661) 823-8135 Fax Number: (661) 823-1251

Email Address: _____

GENERAL INFORMATION

(Attach a supplementary statement, if necessary)
RETURN ORIGINAL TO COMMISSION, NO PHOTOCOPIES.

1. If a corporation show:
 - (A) Date of organization N/A. incorporated in the State of _____
 - (B) Names, titles and addresses of principal officers:

2. If unincorporated provide the name and address of the owner(s) or the partners:

LAWANDA M. STANLEY, OWNER 21260 SIERRA VISTA DR.
TEHACHAPI, CA. 93561
3. Name, title, and telephone number of:
 - (A) One person listed above to receive correspondence: (661) 823-1251
 - (B) Person responsible for operations and services:
SAME AS ABOVE
4. Were any contracts or agreements in effect with any organization or person covering service, supervision and/or management of your business affairs during the year? (Yes or No)
If so, what was the nature and the amount of each payment made under the agreement, to whom were payments made, and to what account was each payment charged?
5. State the names of associated companies or persons which, directly or indirectly, or through one or more intermediaries, control, or are controlled by, or are under common control with respondent: N/A

PUBLIC HEALTH STATUS

6. Has state or local health department inspection been made during the year?
7. Are routine laboratory tests of water being made?
8. Has state health department water supply permit been obtained? (Indicate date)
9. If no permit has been obtained, state whether application has been made and when.
10. Show expiration date if state permit is temporary.

Yes	No	Latest Date
<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	MONTHLY
<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	1-3-08
<input type="checkbox"/>	<input type="checkbox"/>	

FEE WAS PAID 1/3/08

11. List Name, Grade, and License Number of all Licensed Operators:

STEVE WHITE GRADE 2 LICENSE #16098

SKOOKUM H₂O MONITORING SERVICE

NONE

Excess Capacity and Non-Tariffed Services

NOTE: In D.00-07-018, D.03-04-028, and D.04-12-023, the CPUC set forth rules and requirements regarding water utilities provision of non-tariffed services using excess capacity. These decisions require water utilities to: 1) file an advice letter requesting Commission approval of that service, 2) provide information regarding non-tariffed goods/services in each company's Annual Report to the Commission.

Based on the information and filings required in D.00-07-018, D.03-04-028, and D.04-12-023, provide the following information by each individual non-tariffed goods and services provided in calendar year 2009:

Applies to All Non-Tariffed Goods/Services that require Approval by Advice Letter											
Row No.	Description of Non-Tariffed Good/Service	Active or Passive (by account)	Total Revenue Derived From Non-Tariffed Goods/Services (by account)	Revenue Account Number	Total Expenses Incurred to Provide Non-Tariffed Goods/Services (by account)	Expense Account Number	Advice Letter and/or Resolution Number Approving Non-Tariffed Goods/Services	Total Income Tax Liability Incurred Because of Non-Tariffed Goods/Services (by account)	Income Tax Liability Account Number	Gross Value of Regulated Assets Used in the Provision of a Non-Tariffed Good/Service (by account)	Regulated Asset Account Number

**FOR ALL WATER COMPANIES
SAFE DRINKING WATER BOND ACT/STATE REVOLVING FUND DATA**

Please provide the following information relating to each Safe Drinking Water Bond Act (SDWBA) or Safe Drinking Water State Revolving Fund loan surcharge collection for the calendar year. Please use one page per loan.

1. Current Fiscal Agent: *NONE*

Name: _____
 Address: _____
 Phone Number: _____
 Account Number: _____
 Date Hired: _____

2. Total surcharge collected from customers during the 12 month reporting period:

\$ _____	Meter Size	No. of Metered Customers	Monthly Surcharge Per Customer
	3/4 inch	_____	_____
	1 inch	_____	_____
	1 1/2 inch	_____	_____
	2 inch	_____	_____
	3 inch	_____	_____
	4 inch	_____	_____
	6 inch	_____	_____
	Number of Flat Rate Customers	_____	_____
	Total	_____	_____

3. Summary of the bank account activities showing: *NONE*

Balance at beginning of year	\$ _____
Deposits during the year	_____
Interest earned for calendar year	_____
Withdrawals from this account	_____
Balance at end of year	_____

4. Reason or Purpose of Withdrawal from this bank account:

FOR ALL WATER COMPANIES
SAFE DRINKING WATER BOND ACT/STATE REVOLVING FUND DATA (Continued)

5. Plant amounts included in Schedule A-1a, Account No. 101--Water Plant in Service which were funded using SDWBA or SRF funds:

Line No.	Acct. No.	Title of Account (a)	Balance Beginning of Year (b)	Plant Additions During Year (c)	Plant Retirements During Year (d)	Other Debits* or (Credits) (e)	Balance End of Year (f)
1		NON-DEPRECIABLE PLANT					
2	301	Intangible plant		NONE	NONE		
3	303	Land					
4		Total non-depreciable plant					
5		DEPRECIABLE PLANT					
6	304	Structures					
7	307	Wells					
8	317	Other water source plant					
9	311	Pumping equipment					
10	320	Water treatment plant					
11	330	Reservoirs, tanks and sandpipes					
12	331	Water mains					
13	333	Services and meter installations					
14	334	Meters					
15	335	Hydrants					
16	339	Other equipment					
17	340	Office furniture and equipment					
18	341	Transportation equipment					
19		Total depreciable plant					
20		Total water plant in service					

SCHEDULE A - BALANCE SHEET (AS OF DECEMBER 31, 2009)

Line	Acct.	Assets	Balance	Acct.	Equity and Liabilities	Balance
1	101	Water plant in service	131,363	201	Common Stock (Corporations only)	0
2	103	Water plant held for future use	0	211	Other paid-in capital (Corporations only)	0
3	104	Water plant purchased or sold	0	215	Retained earnings	0
4	105	Water plant construction work in progress	0	218	Proprietary capital	135,623
5	108	Accumulated depreciation of water plant		224	Long term debt	0
6	114	Water plant acquisition adjustments	0		Current Liabilities CAPITAL C.O.	(2614)
7	124	Other investments	0	252	Advances for construction	0
8	131	Cash	3897	253	Other deferred credits	0
9	141	Accounts receivable - customers		255	Accumulated deferred investment tax credits	0
10	142	Receivables from associated companies	0	282	Accumulated deferred income taxes - ACRS	0
11	151	Materials and supplies	363		depreciation	
12	174	Other current assets		283	Accumulated deferred income taxes - other	0
13	180	Deferred charges		271	Contributions in aid of construction	0
14				272	Accumulated amortization of contributions	0
15		Total Assets	135,623		Total Equity and Liabilities	131,904

SCHEDULE B - WATER PLANT IN SERVICE

Line	Acct	Title of Account	Balance Beg of Year	Plt Additions During year	Plt Retirements During year	Other Debits or (Credits)*	Balance End of year
1	301	Intangible plant		0	0		0
2	303	Land	1,000				
3	304	Structures	11,632				
4	307	Wells	1,800				
5	317	Other water source plant					
6	311	Pumping equipment	16,119				
7	320	Water treatment plant	1,002				
8	330	Reservoirs tanks and sandpipes	15,510				
9	331	Water mains	14,457				
10	333	Services and meter installations	64,323				
11	334	Meters	5,151				
12	335	Hydrants	766				
13	339	Other equipment					
14	340	Office furniture and equipment	1,200				
15	341	Transportation equipment	0				
16		Total water plant in service	131,363				

* Debit or credit entries should be explained by footnotes or supplementary schedules

SCHEDULE C - RESERVE FOR DEPRECIATION OF UTILITY PLANT

Line	Item	Account 106 Water Plant	Account 106.1 SDWBA Loans	
1	Balance in reserves at beginning of year			A. Method used to compute depreciation
2	Add: Credits to reserves during year			expense (Acct. 403) and rate.
3	(a) Charged to Account No. 272			
4	(b) Charged to Account No. 403			
5	(c) Charged to Account No. 407			B. Amount of depreciation expense claimed
6	(d) Salvage recovered			or to be claimed on utility property in
7	(e) All other credits			your federal income tax return for the year
8	Total credits			covered by this report \$ 1,205. -
9	Deduct: Debits to reserves during year			
10	(a) Book cost of property retired			
11	(b) Cost of removal			C. State method used to compute tax
12	(c) All other debits			depreciation.
13	Total debits			511
14	Balance in reserve at end of year			
15	(1) Explanation of all other credits			
16	(2) Explanation of all other debits			

SCHEDULE D - CAPITAL STOCK OUTSTANDING (AS OF DECEMBER 31, 2009) NONE			
Line			
1	Common - (Shares	\$	par)
2	Preferred - (Shares	\$	par)
3	Dividends - Common	Rate - \$	
4	- Preferred	Rate - \$	

SCHEDULE E - LONG TERM DEBTS NONE								
Line	Class	Date of Issue	Date of Maturity	Principal Amount Authorized	Outstanding Per Balance Sheet	Rate of Interest	Interest Accrued During Year	Interest Paid During Year
1								
2								
3								
4	Total							

SCHEDULE F - INCOME STATEMENT			
Line	Acct.	Operating revenues	
1	460	Unmetered water revenue	355
2	462	Fire protection revenue	0
3	465	Irrigation revenue	0
4	470	Metered water revenue	29,681
5	480	Other water revenue	
6		Total Operating Revenue	30,036
7		Operating revenue deductions	
8		Operating expenses	
9	610	Purchased water	0
10	615	Purchased power	2,063
11	618	Other volume related expenses	2,702
12	630	Employee labor	0
13	640	Materials	
14	650	Contract work	4,240
15	660	Transportation expenses	2,381
16	664	Other plant maintenance expense	
17	670	Office salaries	0
18	671	Management salaries	12,000
19	674	Employee pensions and benefits	0
20	676	Uncollectible accounts expense	
21	678	Office services and rentals P.O. BOX + POSTAGE	559
22	681	Office supplies and expense	173
23	682	Professional services HEALTH DEPT FEES	391
24	684	Insurance	1,686
25	688	Regulatory commission expense	443
26	689	General expenses	730
27		Total Operating Expenses	27,348
28	403	Depreciation expense	1,205
29	407	SDWBA loan amortization expense	
30	408	Taxes other than income taxes	379
31	409	State income tax expense	0
32	410	Federal income tax expense	0
33		Total Operating Revenue Deductions	28,926
34		Utility Operating Income	30,036
35	421	Non-utility income	0
36	426	Miscellaneous non-utility expense	0
37	427	Interest expense c. e.	397
38		Net Income	813.-

DISINFECTION/TESTING

SCHEDULE G - SOURCES OF SUPPLY AND WATER DEVELOPED WELLS

Location	No.	Diam. Inch	Depth to Water Feet	Pumping Capacity (g.p.m.)	Annual Quantities Pumped
TRACT 3312, LOT 133, KERN CO.	1	6"	DEPTH TO SUCTION IN-TAKE 297865	45 GPM	1,899,087 GAL.
OTHER N/A					
Streams or Springs Location of Diversion Point	Flow in Priority Right		Diversions (Unit)		Annual Quantities Diverted
	Claim	Capacity	Max	Min	Unit
Purchased water (unit) N/A				Annual Quantity	
Supplier:					

SCHEDULE H - WATER DELIVERED TO METERED CUSTOMERS

(If figures are available) (specify unit)

Classification of Service	Month of Year		Annual Total
	Maximum	Minimum	
Residential	175,855 ga	98,414 ga.	1,583,037.28 GAL.
Commercial	JUNE	MAY	0
Industrial			0
Fire Protection			0
Irrigation			0
Other (specify)			0
Total	175,855 ga	98,414 ga	1,583,037.28 gal

SCHEDULE I - EMPLOYEES AND THEIR COMPENSATION NONE

Line	Acct	Account	Number at End of Year	Salaries Charged to Expense	Salaries Charged to Plant Accounts	Total Salaries and Wages Paid
1	630	Employee Labor	0			
2	670	Office salaries	0			
3	671	Management salaries	1	\$ 12,000		12,000.-
4		Total	1	12,000		12,000.-

SCHEDULE J - ADVANCES FOR CONSTRUCTION	
Balance beginning of year	
Additions during year	
Subtotal - Beginning balance plus additions during year	
Refunds	
Transfers to Acct. 271 - Contributions in Aid of Construction	
Balance end of year	0

SCHEDULE K - TOTAL METERS AND SERVICES (Active and Inactive)		
Size	Meters	Services
5/8 x 3/4-in	42	
3/4-in		
1-in		
-in		
-in		
Total	42	

SCHEDULE L - METER-TESTING DATA		
Number of meters tested during year		
1	Used, before repair	0
2	Used, after repair	0
3	Fast, requiring refund	0
Numbers of meters in service requiring test per General Order No. 103		

SCHEDULE M - SERVICE CONNECTIONS AT END OF YEAR								
Classification	Active			Inactive			Total Connections*	
	Metered	Flat	Total	Metered	Flat	Total	Metered	Flat
Residences	37	—	37	5		5	42	
Industrial/Commercial	—							
Irrigation	—							
Fire Protection (public)	—							
Fire Protection (private)	—							
Other (specify)	—							
Total	37		37	5		5	42	

* NOTE: Total connections (metered plus flat) should agree with total services in Schedule K.

SCHEDULE N - STORAGE FACILITIES		
Description	No.	Combined Capacity in Gallons
Concrete		
Earth		
Wood		
Steel	1	12,500
Other		
Total	1	12,500

SCHEDULE O - FOOTAGES OF PIPE (EXCLUDING SERVICE PIPES)					
Description	2" and under	2 1/4 to 3 1/4	4"	Other Sizes (Specify)	Total
Cast Iron					
Welded steel					
Standard screw					
Cement-asbestos					
Plastic	5568			7226	13,044
Other (specify)					
Total	5568				

FACILITY FEES DATA

Please provide the following information relating to Facility Fees collected for the calendar year 2009, pursuant to Resolution No. W-4110.

1. Trust Account Information:

N/A

Bank Name: _____
 Address: _____
 Account Number: _____
 Date Opened: _____

2. Facilities Fees collected for new connections during the calendar year:

N/A

A. Commercial

NAME	AMOUNT
<i>NONE</i>	\$
_____	\$
_____	\$
_____	\$

B. Residential

NAME	AMOUNT
<i>NONE</i>	\$
_____	\$
_____	\$
_____	\$

3. Summary of the bank account activities showing:

N/A

	AMOUNT
Balance at beginning of year	\$
Deposits during the year	_____
Interest earned for calendar year	0
Withdrawals from this account	_____
Balance at end of year	_____

4. Reason or Purpose of Withdrawal from this bank account:

N/A

DECLARATION

(PLEASE VERIFY THAT ALL SCHEDULES ARE ACCURATE AND COMPLETE BEFORE SIGNING)

I, the undersigned (authorized officer, partner or owner) of _____ (Name of utility), under penalty of perjury do declare that this report has been prepared by me, or under my direction, from the books, documents, and records of the respondent; that I have carefully examined the same, and declare the same to be a complete and correct statement of the business and affairs of the above-named respondent and the operations of its property for the period of January 1, 2009 through December 31, 2009.

Laveranda M. Stanley

Signature

Owner

Title

3-15-2010

Date