FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

	OMB APPROVAL								
	OMB Number: 3235-0104 Estimated average burden								
	hours per response	e: 0.5							

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

RAHN LEROY T			Date of Event Requiring Stater Month/Day/Yea	nent		er Name and Ticker or Trac COWHEAD RESE	rading Symbol EARCH CORP [ARWR]					
(Last)	(First)	(Middle)				ationship of Reporting Perso call applicable) Director	on(s) to Issuer		5. If Amendment, Date of Original Filed (Month/Day/Year)			
(Street) PASADENA		91106			11	Officer (give title below)	Other (spe- below)	cify [cable Line) Form filed by	Group Filing (Check One Reporting Person More than One	
(City)	(State)	(Zip)								. toporting r		
Table I - Non-Derivative Securities Beneficially Owned												
1. Title of Security (Instr. 4)					2. Amount of Securities Beneficially Owned (Instr. 4)				4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)												
1. Title of Derivative Security (Instr. 4)		2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security			4. Convers	ise	5. Ownership Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)		
			Date Exercisable	Expiration Date	n Title		Amount or Number of Shares	Price of Derivati Security	ve	Direct (D) or Indirect (I) (Instr. 5)		
Stock Option			02/11/2004	02/11/2014	4	common stock	50,000	1		D		

Explanation of Responses:

LeRoy T. Rahn

06/08/2004

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.

 $^{^{\}star}$ If the form is filed by more than one reporting person, see Instruction 5 (b)(v).

^{**} Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).