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STATE OF CALIFORNIA
THE RESOURCES AGENCY
DEPARTMENT OF WATER RESOURCES
WATER WELL DRILLERS REPORT

Do Not Fill In
Nº 85371

State Well No. _____
Other Well No. _____

(1) OWNER:
Name **Richard Uebner**
Address **P. O. Box 102**
Catheys Valley, Ca. 95306

(11) WELL LOG:
Total depth **85** ft. Depth of completed well **85**
Formation: Describe by color, character, size of material, and structure
0 ft. to **20** Overburden
20 - 45 Granite
45 - 47 Broken Granite & Water
47 - 60 Granite
60 - 62 Broken Granite & Water
62 - 70 Granite
70 - 75 Broken Granite & Water
75 - 85 Granite

(2) LOCATION OF WELL:
County **Mariposa** Owner's number, if any _____
Township, Range, and Section **T5S, R17E, Sec. 3**
Distance from cities, roads, railroads, etc. **1 mi. W of Highway 140 on left side of Trower Road.**

(3) TYPE OF WORK (check):
New Well Deepening Reconditioning Destroying
If destruction, describe material and procedure in Item 11.

(4) PROPOSED USE (check):
Domestic Industrial Municipal
Irrigation Test Well Other

(5) EQUIPMENT:
Rotary
Cable
Other

(6) CASING INSTALLED:

STEEL:				OTHER:			If gravel packed			
From ft.	To ft.	Diam.	Gage or Wall	Diameter of Bore	From ft.	To ft.				
0	40	6 3/4	12							

Size of shoe or well ring: _____ Size of gravel: _____

Describe joint **weld**

(7) PERFORATIONS OR SCREEN:
Type of perforation or name of screen **NONE**

From ft.	To ft.	Perf. per row	Rows per ft.	Size in. x in.

(8) CONSTRUCTION:
Was a surface sanitary seal provided? Yes No To what depth **40** ft.
Were any strata sealed against pollution? Yes No If yes, note depth of strata _____
From _____ ft. to _____ ft.
From _____ ft. to _____ ft.

Method of sealing **concent**

(9) WATER LEVELS:
Depth at which water was first found, if known **45** ft.
Standing level before perforating, if known _____ ft.
Standing level after perforating and developing _____ ft.

(10) WELL TESTS:
Was pump test made? Yes No If yes, by whom? _____
Yield: **Appr. 10** gal./min. with _____ ft. drawdown after _____ hrs.
Temperature of water _____ Was a chemical analysis made? Yes No
Was electric log made of well? Yes No If yes, attach copy _____

Work started **7-22** 19 **74**, Completed **7-22** 19 **74**

WELL DRILLER'S STATEMENT:
This well was drilled under my jurisdiction and this report is true to the of my knowledge and belief.

NAME **Stroming Machinery**
(Person, firm, or corporation) (Typed or printed)

Address **P. O. Box 321**
Mariposa, Ca. 95338

[SIGNED] _____ (Well Driller)

License No. **265498** Dated **8-30**, 19 **74**

SKETCH LOCATION OF WELL ON REVERSE SIDE