



COUNTY OF SAN LUIS OBISPO HEALTH AGENCY  
 ENVIRONMENTAL HEALTH SERVICES DIVISION  
 2156 SIERRA WAY, STE. B SAN LUIS OBISPO, CA 93401  
 PHONE: (805)781-5544 EMAIL: EHS@CO.SLO.CA.US  
 www.slopublichealth.org/ehs

**OFFICE USE**

Permit No. \_\_\_\_\_

Submittal Complete

Date \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

WP No. \_\_\_\_\_

Invoice No. \_\_\_\_\_

Scanned \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

**WELL PERMIT APPLICATION**

FOR CONSTRUCTION, REPAIR, OR MODIFICATION OF WATER WELLS

**Construction**    **Repair/Modification**    **Replacement**

**SITE INFORMATION**

Proposed Well Site Address GEORGIA ROAD City or Area CA VALLEY

Assessor's Parcel Number 082-281-045 GPS 35.29676 N 120.01376

Site served by a water company, agency or district?  No  Yes Water Co. Name \_\_\_\_\_

**PROPERTY OWNER INFORMATION**

Property Owner Name THOMAS & CHERIE DOHERTY

Mailing Address PO BOX 52 City FREELAND, WA Zip 98249

Telephone Number 805-807-1968 Email TOMDOHERTY1319@GMAIL.COM

Property Owner Signature \_\_\_\_\_ Date 7/2/21

**WELL OWNER INFORMATION (If Different From Property Owner)**

Well Owner Name \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Telephone Number \_\_\_\_\_ Email \_\_\_\_\_

**WELL CONSULTANT INFORMATION**

Consultant Name \_\_\_\_\_ Telephone Number \_\_\_\_\_

Email \_\_\_\_\_

**WELL DRILLER INFORMATION**

Drilling Contractor Name Ned M. Thompson C-57 License No. 432680

Drilling Company Name Filipponi-Thompson Drilling, Inc. Telephone Number 805-466-1271

Mailing Address PO Box 845 - Atascadero, CA 93422

Fax 805-466-2388 Email Address Emily@ftdrilling.com

I hereby agree to comply with all applicable laws and regulations of the County of San Luis Obispo and the State of California pertaining to well construction, destruction, repair, or modification and to the payment of any additional fees to complete any required environmental or technical review of the application. Within sixty days after completion of the well, I will furnish Environmental Health Services with a well completion report and water quality test results. The application becomes a valid permit following sign off by Environmental Health.

**DRILLING SHALL NOT COMMENCE UNTIL THIS APPLICATION IS APPROVED**

Contractor Signature \_\_\_\_\_ Date \_\_\_\_\_

Contractor Printed Name Ned M. Thompson

**FOR OFFICE USE ONLY**

RECEIVED BY \_\_\_\_\_ DATE \_\_\_\_\_ FEE PAID \$ \_\_\_\_\_ CK/CC# \_\_\_\_\_

WELL SITE VERIFIED: YES  NO  BY \_\_\_\_\_ DATE \_\_\_\_\_

WELL SITE VERIFIED GPS COORDINATES \_\_\_\_\_ N \_\_\_\_\_ W \_\_\_\_\_

SITE LETTER DATE \_\_\_\_\_ PERMIT EXPIRATION DATE \_\_\_\_\_

COMMENTS \_\_\_\_\_

CONDUCTOR CASING SEAL WITNESSED YES  NO  BY \_\_\_\_\_ DATE \_\_\_\_\_ DEPTH \_\_\_\_\_

WELL SEAL WITNESSED YES  NO  BY \_\_\_\_\_ DATE \_\_\_\_\_ DEPTH \_\_\_\_\_

BOREHOLE DESTRUCTION/SEAL WITNESSED YES  NO  BY \_\_\_\_\_ DATE \_\_\_\_\_ DEPTH \_\_\_\_\_

WELL SEAL GPS COORDINATES \_\_\_\_\_ N \_\_\_\_\_ W \_\_\_\_\_

WELL COMPLETION REPORT RECEIVED DATE \_\_\_\_\_ WATER QUALITY TEST RESULTS RECEIVED DATE \_\_\_\_\_ FINAL LETTER SENT DATE \_\_\_\_\_

**WELL PROPOSAL DETAILS**

Proposed Use:  Domestic Private  Irrigation  Agriculture  Commercial  Public/Community Water System

Public Water System Name \_\_\_\_\_ Contact \_\_\_\_\_ (If Different From Owner)

Is proposed well located within city limits?  No  Yes, name of city \_\_\_\_\_

Parcel Size (acres): 2.5  
 Paso Robles GWB  Edna GWB  Cuyama GWB  Los Osos GWB  Santa Maria GWB  
 Coastal Zone  Lake Nacimiento  Sensitive Resource Area

Basin Name \_\_\_\_\_ Sub-Basin Name \_\_\_\_\_ Target Aquifer/Basin \_\_\_\_\_

1) Do you anticipate drilling into a water bearing formation that has the potential to degrade a higher quality aquifer?  
 No  Yes

2) Do you anticipate encountering soil conditions between ground surface and groundwater other than those described in State Well Standard 8.A?  No  Yes

3) Are there any other conditions that may render inadequate the minimum horizontal separation distances identified in State Well Standard 8.A to ensure that the well does not result in deterioration of groundwater quality?  No  Yes

4) Are there any areas with known or suspected soil or water pollution or contamination for which a certain horizontal separation distance may need to be established in order to ensure that the well does not result in deterioration of groundwater quality despite the increased 50 foot minimum seal depth identified in the County Code?  No  Yes

If, during well construction, you encounter any soil or other conditions or water pollution or contamination that would modify your answer to any of the above questions, you must cease drilling immediately and notify Environmental Health Services of the changed circumstances.

**WELL CONSTRUCTION DETAILS**

Drilling Method:  Mud Rotary  Air Rotary  Reverse Rotary  Cable Tool  Other \_\_\_\_\_

Exploration Hole: Exploration/Borehole Depth 500 ft. Exploration/ Borehole Diameter 10 in.

Conductor Casing: Conductor Depth \_\_\_\_\_ ft. Diameter \_\_\_\_\_ in. Material \_\_\_\_\_ Seal Depth \_\_\_\_\_ ft.

Boring: Boring Depth 500 ft. Boring Diameter 10 in.

Well Casing: Production Casing Depth 500 ft. Diameter 5 in. Gravel Pack/ Gravel Size 8 x 20

Thickness/Gauge/ASTM sched. SDR-21  Steel  Plastic  Stainless  Other \_\_\_\_\_

Annular Seal: Depth 20 ft.  Neat Cement  Sand Cement \_\_\_\_\_ sack mix Other \_\_\_\_\_

Seal Method:  Pumped with tremie pipe  Other \_\_\_\_\_  Retardant/Accelerator (name) \_\_\_\_\_

**ATTACHMENTS**

Geologist letter attached:  Yes  No (Required for wells 800' or deeper OR equal to or deeper than the sub-area thresholds in the PRGWB or where the answer to question 1) is yes)

Other attachments:  Construction Plan/Diagram  Land Use Permit  Coastal Zone Permit

Other, please explain \_\_\_\_\_

**WELL PROPOSAL/CONSTRUCTION MODIFICATIONS** NOTE: NOT APPROVED UNTIL SIGNED BELOW

Date: \_\_\_\_\_ Description: \_\_\_\_\_

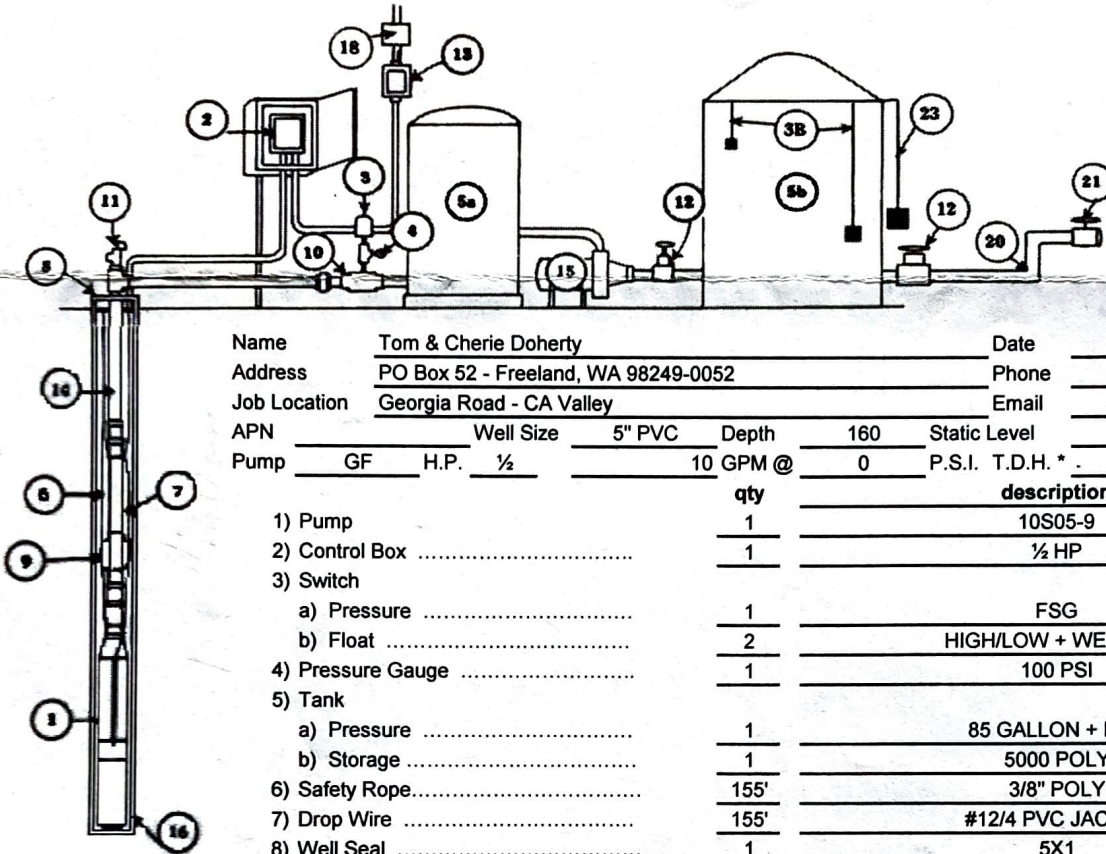
**FOR OFFICE USE ONLY—PROJECT MODIFICATIONS EVALUATION**

Received By: \_\_\_\_\_ Evaluated By: \_\_\_\_\_ Date: \_\_\_\_\_

Approved  Denied  Approved with Comments: \_\_\_\_\_

**COMPLETE AND ATTACH REQUIRED SCALED PLOT PLAN AND ANY REQUIRED LAND USE PERMITS OR GEOLOGIC REPORTS AS APPLICABLE**

## PUMP SYSTEM AGREEMENT/ESTIMATE



Name	Tom & Cherie Doherty		Date	1/20/2022		
Address	PO Box 52 - Freeland, WA 98249-0052		Phone	805-807-1968		
Job Location	Georgia Road - CA Valley		Email			
APN	Well Size	5" PVC	Depth	160	Static Level	50
Pump	GF	H.P. 1/2	10 GPM @	0	P.S.I.	T.D.H. * 160

	qty	description
1) Pump	1	10S05-9
2) Control Box	1	1/2 HP
3) Switch		
a) Pressure	1	FSG
b) Float	2	HIGH/LOW + WEIGHTS
4) Pressure Gauge	1	100 PSI
5) Tank		
a) Pressure	1	85 GALLON + PAD
b) Storage	1	5000 POLY
6) Safety Rope	155'	3/8" POLY
7) Drop Wire	155'	#12/4 PVC JACKET
8) Well Seal	1	5X1
9) Torque Arrestor	1	TAU8
10) Check Valve	1	1 1/4" STAINLESS
11) Relief Valve	1	3/4" 75 PSI
12) Gate Valve	1	PVC
13) Elec. Service	1	POST/DISCONNECT
14) Drop Pipe	150	1" PVC SCH. 80 T&C
15) Booster Pump	1	J7S
16) Misc. Pipe Fittings		X
17) Misc. Elec. Fittings		X
18) Liquid Level Control	1	INSIDER PUMP SAVER
19) Pipeline to House		NOT INCLUDED
20) Fire Line		NOT INCLUDED
21) Fire Outlet w/Fitting		NOT INCLUDED
22) Pad for Tank		NONE
23) Site Gauge	1	PVC

The above graphic illustration is to show the general relationship of parts and does not necessarily represent the complete installation.

\*T.D.H Total head pressure in feet

### Additional Comments

ASSUMES LEVEL SPOT FOR TANK NEXT TO WELL. A 3,000 GALLON TANK WOULD BE APPROX \$1,700 LESS.

Sub	\$8,571.75
Tax	\$621.45
Test Pump	
Trench	
Labor	\$2,100.00
<b>TOTAL</b>	<b>\$11,293.20</b>

*Ed M. Thompson*