

DUPLICATE
Driller's Copy

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

Do not fill in

No. 07662

Notice of Intent No. _____

Local Permit No. or Date _____

State Well No. _____

Other Well No. _____

(1) OWNER: Name _____

Address _____

City _____ Zip _____

(2) LOCATION OF WELL (See instructions):

County SLO Owner's Well Number _____

Well address if different from above _____

Township 30S Range 20E Section 17

Distance from cities, roads, railroads, fences, etc. _____

Unit 4 Lots ~~47~~ 47 C/V Hwy. 58 & Alhambra

(12) WELL LOG: Total depth 200 ft. Depth of completed well 200 ft.
from ft. to ft. Formation (Describe by color, character, size or material)

0 - 1 Top Soil

1 - 180 Shale

180 - 185 Yellow Clay

185 - 195 Shale

195 - 200 Yellow Clay

(3) TYPE OF WORK: NOTE: Any person removing the cap from this well
New Well ☒ Deepening ☐ other than Miller Drilling Co. or authorized
Reconstruction ☐ contractor approved by us will void all
Reconditioning ☐ structural warranties.
Horizontal Well ☐

Destruction ☐ (Describe
destruction materials and
procedures in Item 12)

(4) PROPOSED USE:

Domestic ☒

Irrigation ☐

Industrial ☐

Test Well ☐

Stock ☐

Municipal ☐

Other ☐

WELL LOCATION SKETCH

(5) EQUIPMENT:

Rotary ☒ Reverse ☐

Cable ☐ Air ☐

Other ☐ Bucket ☐

(6) GRAVEL PACK:

Yes ☒ No ☐ Size bye

Diameter of bore 10 5/8"

Packed from 20 to 200 ft.

(7) CASING INSTALLED:

Steel ☐ Plastic ☒ Concrete ☐

(8) PERFORATIONS:

Type of perforation or size of screen

From ft.	To ft.	Dia. in.	Gage or Wall	From ft.	To ft.	Slot size
0	200	6	.316	0	100	Blank
				100	200	Perf.

(9) WELL SEAL:

Was surface sanitary seal provided? Yes ☒ No ☐ If yes, to depth 20 ft.

Were strata sealed against pollution? Yes ☐ No ☐ Interval _____ ft.

Method of sealing Cement

(10) WATER LEVELS:

Depth of first water, if known 115 ft.

Standing level after well completion 105 ft.

(11) WELL TESTS:

Was well test made? Bail Test 20 gpm at 200'

Type of test Pump ☐ Bailor ☐ Air lift ☐

Depth to water at start of test _____ ft. At end of test _____ ft.

Discharge _____ gal/min after _____ hours Water temperature _____

Chemical analysis made? Yes ☐ No ☐ If yes, by whom? _____

Was electric log made? Yes ☐ No ☐ If yes, attach copy to this report

Work started 10/21/78 19 _____ Completed 10/23/78

WELL DRILLER'S STATEMENT:

This well was drilled under my irrigation and this report is true to the best of my knowledge and belief.

SIGNED Miller (Well Driller)

NAME Miller Drilling Co.
(Person, firm, or corporation) (Typed or printed)

Address 501 No. Main St.

City Templeton, CA. 93465 Zip _____

License No. 324634 Date of this report 10/24/78