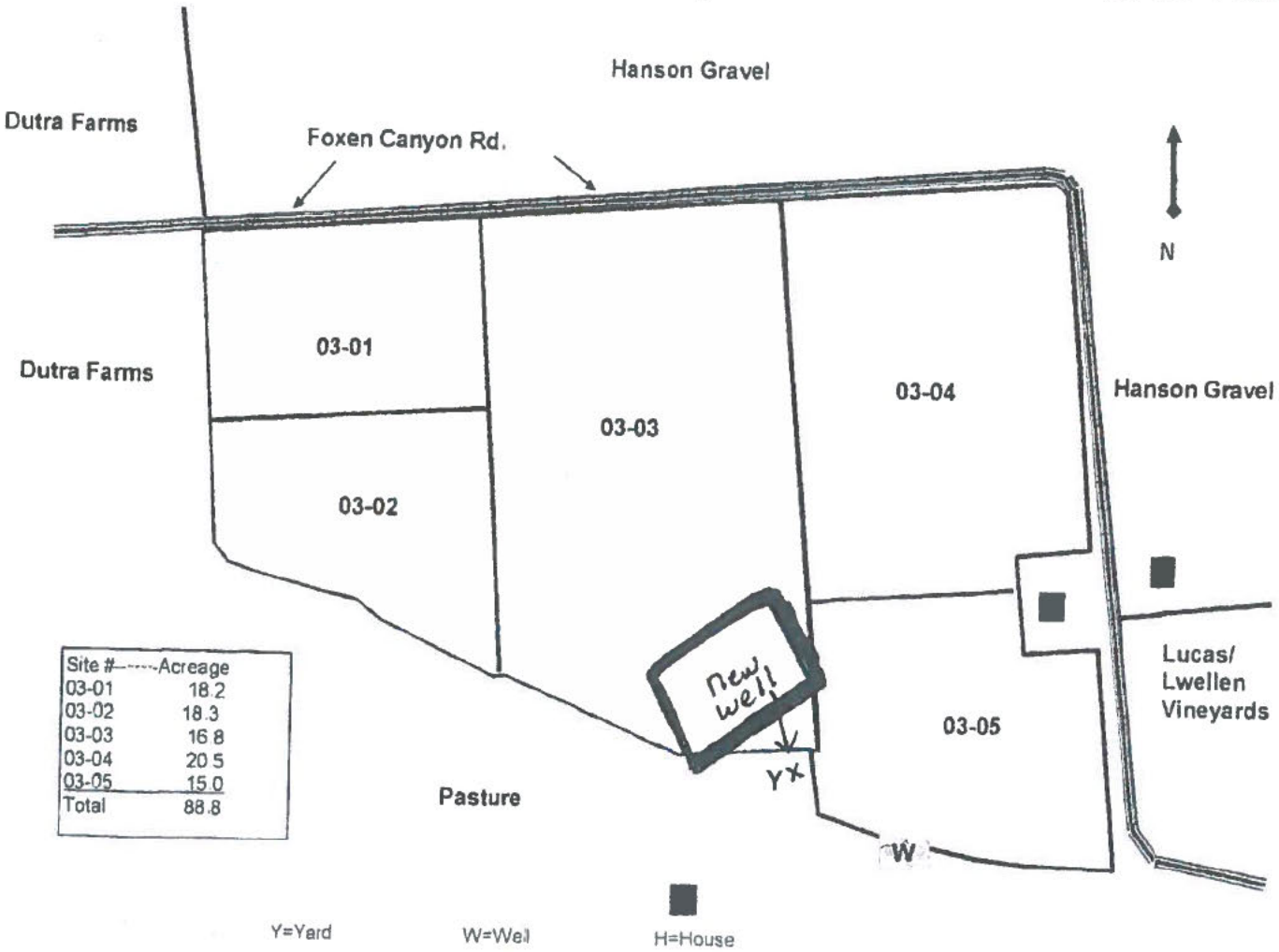
APn # 129-210-008
Owner - J.C. + Elsie Teixeira Family Partnership
Address - 5235 Foxen Canyon Rd
Santa Maria, CA. 93454

Permit # SR 0107901

R.F. 7/6/11

Teixeira Farms - Ranch 3
Santa Barbara County



Site #------	Acreage
03-01	18.2
03-02	18.3
03-03	16.8
03-04	20.5
03-05	15.0
Total	88.8

Page 1
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CC 302

ORIGINAL
File Original, Duplicate and Triplicate with the
REGIONAL WATER POLLUTION
CONTROL BOARD No. 3
(Insert appropriate number)

WATER WELL DRILLERS REPORT

(Sections 7076, 7077, 7078, Water Code)

THE RESOURCES AGENCY OF CALIFORNIA

9N32W-18H

Do Not Fill In
Nº 104167
State Well No. 9N/32W/ -18R
Other Well No.

[redacted]

(2) LOCATION OF WELL:

County Santa Barbara Owner's number, if any— Rotary #1

R. F. D. or Street No.

1/2 mile south of Foxen Canyon Road.
250 feet west of Long Canyon Road,
Sisquoc.
34.858288 -120.277630

(3) TYPE OF WORK (check):

New well ☒ Deepening ☐ Reconditioning ☐ Abandon ☐

If abandonment, describe material and procedure in Item 11.

(4) PROPOSED USE (check):

Domestic ☐ Industrial ☐ Municipal ☐
Irrigation ☒ Test Well ☐ Other ☐

(5) EQUIPMENT:

Rotary ☒
Cable ☐
Dug Well ☐

(6) CASING INSTALLED:

SINGLE ☒ DOUBLE ☐

From 0 ft. to 454 ft. 14 Diam. 5/16 Gage or Wall

If gravel packed

Diameter of Bore	from ft.	to ft.
24"	0	508

Type and size of shoe or well ring

Size of gravel: 3/8

Describe joint Butt welded

(7) PERFORATIONS:

Type of perforator used Machine cut

Size of perforations 14 rows of ~~xxxxxxxx~~ 120 mesh

From ft.	to ft.	Perf. per row	Rows per ft.
147	454		

(8) CONSTRUCTION:

Was a surface sanitary seal provided? ☐ Yes ☒ No To what depth ft.

Were any strata sealed against pollution? ☐ Yes ☒ No If yes, note depth of strata

From ft. to ft.

Method of Sealing

(9) WATER LEVELS:

Depth at which water was first found ft.

Standing level before perforating ft.

Standing level after perforating 78 ft.

(10) WELL TESTS:

Was a pump test made? ☒ Yes ☐ No If yes, by whom? Floyd V. Wells

Yield: 1050 gal./min. with 112 ft. draw down after 4 hrs.

Temperature of water Was a chemical analysis made? ☐ Yes ☒ No

Was electric log made of well? ☐ Yes ☒ No

(11) WELL LOG:

Total depth 508 ft. Depth of completed well 454 ft.

Formation: *Describe by color, character, size of material, and structure.*

ft.	to ft.	
0	4	Top soil
4	7	Sand & small gravel
7	9	Brown sandy clay
9	26	Sand, gravel & boulders
26	28	Yellow sandy clay
28	30	Sand & small gravel
30	49	Yellow clay & gravel
49	73	Sand & gravel with streaks of clay.
73	190	Fine to course sand, small gravel.
190	205	Sandy yellow clay
205	250	Course sand & gravel
250	260	Yellow sandy clay
260	295	Sand & gravel, streaks of clay
295	300	Course sand
300	315	Gravel and sand
315	363	Fine to course sand and smallgravel.
363	393	Yellow sandy clay
393	426	Sand and gravel
426	460	Sand and clay
460	490	Brown clay
490	495	Course sand
495	505	Brown clay
505	508	Course sand.

CONFIDENTIAL - NOT FOR PUBLIC RELEASE

Work started Dec. 10 1965 Completed Dec. 16 1965

[redacted]

9N 32W18L Sisquoc ~~Tepanyoc~~. CC339

ORIGINAL
File with DWR

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

MAR 31 1976

34.856938 -120.286920 9N, 32W-18

Do Not Fill In
№ 106871
State Well No.
Other Well No.

[redacted]

(2) LOCATION OF WELL:
County Santa Barbara Owner's number, if any
Township, Range, and Section T9N, R32W, Sect 18, Parcel#129
Distance from cities, roads, railroads, etc. 240' west of well #2, 24' north of prpty line

(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: SINGLE ☐ DOUBLE ☐ OTHER: Copper Bearing

From ft.	To ft.	Diam.	Gage or Wall	Diameter of Bore	From ft.	To ft.
0	231	10 3/4	.250	20"	0	231

If gravel packed

Size of shoe or well ring: Size of gravel: 3/8
Describe joint Butt

(7) PERFORATIONS OR SCREEN:
Type of perforation or name of screen Vertical slot

From ft.	To ft.	Perf. per row	Rows per ft.	Size in. x in.
135	231		10	1/8 x 3

(8) CONSTRUCTION:
Was a surface sanitary seal provided? Yes ☐ No ☒ To what depth 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

(9) WATER LEVELS:
Depth at which water was first found, if known 110 ft.
Standing level before perforating, if known ft.
Standing level after perforating and developing ft.

(10) WELL TESTS:
Pump test made? Yes ☐ No ☐ If yes, by whom?
Yield: 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

(11) WELL LOG:
Total depth ft. Depth of completed well ft.
Formation: Describe by color, character, size of material, and structure
ft. to ft.
SEE ATTACHED LOG

CONFIDENTIAL - NOT FOR PUBLIC RELEASE

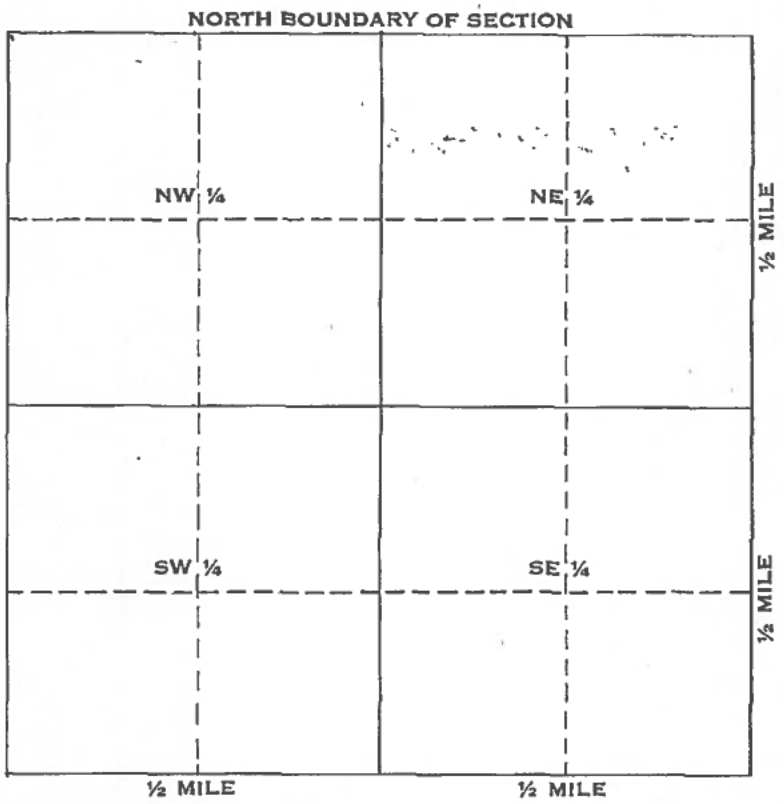
Work started 2/25 1976 Completed 3/5 1976

[redacted]

SKETCH LOCATION OF WELL ON REVERSE SIDE

DWR 188 (REV. 9-68) 67129-750 8-72 30M TRIP OT OSP

WELL LOCATION SKETCH

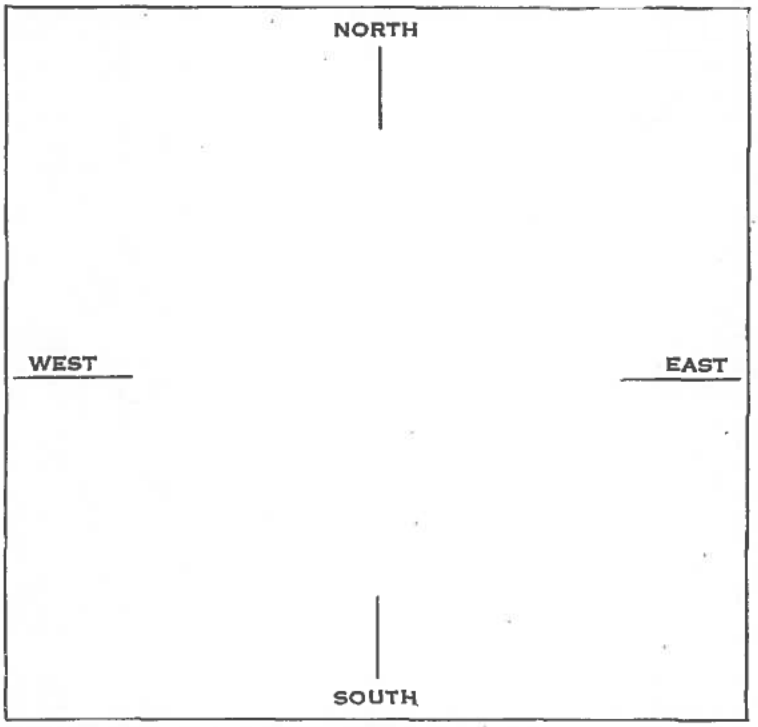


Township _____ N/S

Range _____ E/W

Section No. _____

A. Location of well in sectionized areas.
Sketch roads, railroads, streams, or other features as necessary.



B. Location of well in areas not sectionized.
Sketch roads, railroads, streams, or other features as necessary.
Indicate distances.

RECEIVED
MAR 11 7 42 AM '76
DEPT. OF WATER RESOURCES
SW DIST. MAIL ROOM

106871

SANTA MARIA, CALIFORNIA

FLOYD V. WELLS, INC.

GOLETA, CALIFORNIA

WATER WELL DRILLING LOG

Owner: Uriel Nielson Company:

Well No.: #3 Rig: #7

Location of Well: 240' west of well #2, 24' north of property line
T9N, R32W, Section 18, Parcel #129

Surface Pipe or Seal: none Size: Depth: Gauge:

Well Bore Diameter: 20" Depth of Casing Set: 231'

Casing Size: 10 3/4 Gauge: 250-96' perf 279-135' blank Type: copper bearing

Perforations: Size: 1/8 x 3" Type: Vertical slot Number: 10 rows

Perforation Location from Ground Level: 135' From: 135' To: 231'

Gravel Pack: Type: Dumped Size: 3/8 Quantity: 28.49 ton

Bits: No. Used: 2 Size: (1) 12 1/4" (1) 20"

Drilling Method: Air: Foam: Mud: X

Material Used: Gel.: 17 sks invite ~~X~~ 9 sks baroid gel Foam:

Well Started: 2/25/76 Well Completed: 3/5/76 Driller: Don Pittman

TEST PUMPING INFORMATION:

Production Test:

Standing Water Level: Pumping Level:

G.P.M.: Pumping Level

REMARKS:

New Horizons Print or Lithographic - Santa Maria, CA

SANTA MARIA, CALIFORNIA

FLOYD V. WELLS, INC.

106871

GOLETA, CALIFORNIA

FORMATION LOG

FROM	TO	DESCRIPTION
0	2	Topsoil
2	14	Light fractured shale
14	41	Fractured shale & gravel
41	121	Fine & coarse sand & gravel
121	169	Brownish gray sticky clay
169	223	Brown tight shale
223	235	Dark brown black fractured shale
235	258	Greenish brown shale clay

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FOR PUBLIC RELEASE

Ken Vertrees, Printers, Lithographers - Santa Maria, CA

9N 32W 19

9N/32W 19F1

101-040-021

CC158

QUADRUPLICATE
Use to comply with local requirements

STATE OF CALIFORNIA
THE RESOURCES AGENCY
DEPARTMENT OF WATER RESOURCES

WATER WELL DRILLERS REPORT

Do not fill in
No. 01864

Notice of Intent No. 98500
Final Permit No. or Date 990

State Well No.
Other Well No.

(1) OWNER: Name Bob Russell
Address Rt. 1, Box 155B
City Santa Maria, CA Zip 93454

(2) LOCATION OF WELL (See instructions):
County Santa Barbara Owner's Well Number
Well address if different from above Sisquoc
Township Range Section 9-32N-19
Distance from cities, roads, railroads, fences, etc. Russell Ranch, Long Canyon Road, Sisquoc, CA
Assessor's parcel 101-040-21

34 50' 46.99"
120 17 88.3"

WELL LOCATION SKETCH

(3) TYPE OF WORK:
New Well ☒ Deepening ☐
Reconstruction ☐
Reconditioning ☐
Horizontal Well ☐
Destruction ☐ (Describe destruction materials and procedures in Item 12)

(4) PROPOSED USE:
Domestic ☐
Irrigation ☒
Industrial ☐
Test Well ☐
Stock ☐
Municipal ☐
Other ☐

(5) EQUIPMENT:
Rotary ☒ Reverse ☐
Cable ☐ Air ☐
Other ☐ Bucket ☐

(6) GRAVEL PACK:
Yes ☒ No ☐ Size 3/4 x 8
Diameter of bore 16"
Packed from 0 to 620 ft.

(7) CASING INSTALLED:
Steel ☒ Plastic ☐ Concrete ☐

From ft.	To ft.	Dia. in.	Gauge or Wall
0	601	10 3/4	.250

(8) PERFORATIONS:
Type of perforation or size of screen

From ft.	To ft.	Slot size
0	321	blank
321	521	.125 x 2
521	601	blank

(9) WELL SEAL:
Was surface sanitary seal provided? Yes ☒ No ☐ If yes, to depth 50 ft.
Were strata sealed against pollution? Yes ☐ No ☒ Interval ft.
Method of sealing concrete

(10) WATER LEVELS:
Depth of first water, if known ft.
Standing level after well completion 268 ft.

(11) WELL TESTS:
Was well test made? Yes ☒ No ☐ If yes, by whom? Valley Pump
Type of test Pump ☒ Bailer ☐ Air lift ☐
Depth to water at start of test ft. At end of test 268 ft.
Discharge 960 gal/min after 6 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

(12) WELL LOG: Total depth 696 ft. Depth of completed well 601 ft.

from ft.	to ft.	Formations (Describe by color, character, size or material)
0	10	surface soil
10	40	fine/coarse gravel, med/coarse sand
40	90	fine/coarse gravel, sand, clay
90	120	fine/coarse gravel, clay, sand
120	140	fine/coarse sand, gravel, clay
140	160	fine/coarse gravel, sand, clay
160	170	fine/coarse gravel, fine/coarse sand
170	190	clay, med/coarse gravel, sand
190	260	sm./med. gravel, sand, clay
260	300	clay, sm./med. gravel, sand
300	330	fine/coarse sand, gravel, clay
330	360	sm./med. gravel, fine/coarse sand
360	390	fine/coarse sand, gravel, clay
390	400	sm./med. gravel, blue clay, sand
400	420	blue clay, sm./med. gravel, sand
420	430	blue clay, fine sand, sm. gravel
430	450	tan & blue clay sand, gravel
450	530	sm./med. gravel, fine/coarse sand, clay
530	560	sm./coarse gravel, sand, clay
560	590	sm./coarse gravel, sand, shale
590	696	sm./coarse gravel, sand, shale/clay

Work started 8/2 1977 Completed 8/8 1977

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

SIGNED (Well Driller)

NAME Valley Pump and Supply (Person, firm, or corporation) (Typed or printed)
Address P. O. Box 616
City Buellton, CA Zip 93427
License No. 210448 Date of this report 8/10/77

DWR 188 (REV. 7-75) IF ADDITIONAL SPACE IS NEEDED, USE NEXT CONSECUTIVELY NUMBERED FORM

Permit No. 990

WELL PERMIT APPLICATION

TO: Environmental Health Division
Santa Barbara County Health Care Services

Date 7 22 77

Name of Well Owner Robert G. Russell & Son 805

Mailing Address Route 1 Box 155A Santa Maria Calif. 93454 937-4521
Street, P.O. City State Zip Code Telephone

Well Site Location: Vicinity Map Attached ☐ (Check)

Assessor's Parcel No. 101 040 21 Street Address Long Canyon Rd

Township 9 Range 32 W Section 19 Rancho

Name of Well Driller Stewart Johnston

Company Name Same

Business Address 1363 W. Main St S.M. Date of Work

Contractor's License No. 210488 Start 7 12 77 Finish / /

Permit Type (Check)		Well Use (Check)		Drilling Method (Check)	
Construction	☒	Domestic	☒	Rotary	☒
Repair/Modification	☐	Agriculture	☒	Cable	☐
Destruction	☐	Cathodic	☐	Other	☐
Abandonment	☐	Test	☐		

Proposed Depth 480 ft.

Well Bore Diam 16 in.

Sealing Material (Check)

Neat Cement ☐ Clay ☐

Cement Grout ☒ Concrete ☐

Casing Information

Type: Steel ☒ PVC ☐ Other ☐

Wall/Gage ____ in.

Diameter 10 5/8 in.

Annular Seal Depth 50 ft.

Additional Work Description:

For Department Use Only

Application Disposition:

Approved ☒

Denied ☐

Comments

I hereby agree to comply with all regulations of the County of Santa Barbara pertaining to well construction, repair, modification, destruction and abandonment. The property owner, well driller, or agent will furnish County Health Care Services a complete well log upon completion of well construction.

Signed Helen M. Russell (Applicant) 7 22 77 (Date)

$45 Fee paid on 7 22 77

Receipt No. 328346

Name [signature]

Date 7/25/77

S.B. ☐ Sol ☐

S.M. ☒ Lom ☐

WHEN SIGNED BY HEALTH CARE SERVICES, THIS APPLICATION IS A PERMIT. HEALTH OFFICER SHALL BE NOTIFIED PRIOR TO ALL SEALING OPERATIONS.

S.B.Co.H.D. 10/75
H-96 (Rev. 4/76)

34 50' 47.98"
120 17' 7.19"

CC160

9N/32W-19G

State of California

Well Completion Report

WCR Form Submitted 09/08/2016
WCR2016-006345

wner's Well Number: PDK Farming
Date Work Began: 05/22/2016
Date Work Ended: 08/02/2016
Local Permit Agency: Santa Barbara County Environmental Health Services
Secondary Permit Agency:
Permit Number: 1197
Permit Date: 04/18/2016

Well Owner (must remain confidential pursuant to Water Code 13752)

Name: Peter Adam PDK Farming
Mailing Address: 2101 Sinton Rd.
Betteravia
City: Santa Maria
State: California
Zip: 93458

Planned Use and Activity

Activity: New Well
Planned Use: Water Supply Irrigation - Agriculture

Well Location

Address: 5851 Long Canyon ST
City: Santa Maria
Zip: 93455
County: Santa Barbara
APN: 101-040-021
Township:
Range:
Section:
Baseline Meridian:
Latitude: Deg Min. Sec. N
Longitude: Deg. Min. Sec. W
Dec. Lat:
Dec. Long.:
Vertical Datum:
Horizontal Datum:
Ground Surface Elevation:
Location Accuracy:
Location Determination Method:
Elevation Accuracy:
Elevation Determination Method:

Borehole Information

Orientation: Vertical
Specify:
Drilling Method: Reverse Circulation
Drilling Fluid: Water
Total Depth of Boring: 785 Feet
Total Depth of Completed Well: 785 Feet

Water Level and Yield of Completed Well

Depth to first water: 370 (Feet below surface)
Depth to Static Water Level: 444 (Feet)
Date Measured: 08/11/2016
Estimated Yield*: 1200
Test Type: Pump
Test Length: 4
Total Drawdown: 71 (Feet)
*May not be representative of a well's long term yield.

SEP 12 2016

Geologic Log - Lite

Depth from Surface Feet to Feet		Material Type	Material Color	Material Texture	Material Description
0	3	Soil or Organic			Top Soil
3	25	Clay		Sandy	
25	27	Rock			
27	78	Gravel		Sandy	Clay
78	107	Gravel			
107	125	Clay			
125	149	Gravel			Rocks
149	164	Gravel		Sandy	Clay
164	171	Sand		Fine	
171	209	Clay		Gravely	
209	217	Gravel			
217	245	Gravel		Clayey	
245	314	Clay			
314	326	Sand		Gravely	
326	332	Clay		Sandy	
332	340	Sandstone		Hard	
340	348	Clay		Sandy	
348	359	Sandstone			
359	411	Sandstone		Sandy	Clay
411	419	Clay		Sandy	
419	426	Gravel			
426	463	Clay		Sandy	
463	466	Clay			
466	541	Gravel			Sand
541	552	Clay	Blue	Sandy	
552	560	Sand		Gravely	
560	577	Clay	Blue	Sandy	Some Gravel
577	668	Clay		Sandy	Sand
668	760	Gravel			Sand
760	769	Clay	Brown		
769	785	Gravel	Blue		Clay

Casings

Casing #	Depth from Surface Feet to Feet		Casing Type	Material	Casings Specifications	Wall Thickness (inches)	Outside Diameter (inches)	Screen Type	Slot Size if any (inches)	Description
1	0	50	Conductor or Fill Pipe	Low Carbon Steel	N/A	25	30			
2	0	300	Blank	Mild Steel	N/A	0.25	14			
2	300	450	Blank	Corrosion-Resistant High Strength Low-Alloy Steel	N/A	0.3125	14			HSLA - Core 10
2	450	470	Blank	Other	N/A	0.3125	14			
2	470	600	Screen	Other	N/A	0.3125	14	Wire Wrap	0.05	304 Wirewrap
2	600	630	Blank	Stainless Steel	N/A	0.25	14			
2	630	785	Screen	Other	N/A	0.25	14	Wire Wrap	0.05	

Annular Material

Depth from Surface Feet to Feet		Fill	Fill Type Details	Filter Pack Size	Description
0	50	Cement	10.3 Sack Mix		Seal
50	400	Filter Pack	Other Gravel Pack	Spec	
400	785	Filter Pack	Other Gravel Pack	Lapis 3	

Other Observations:

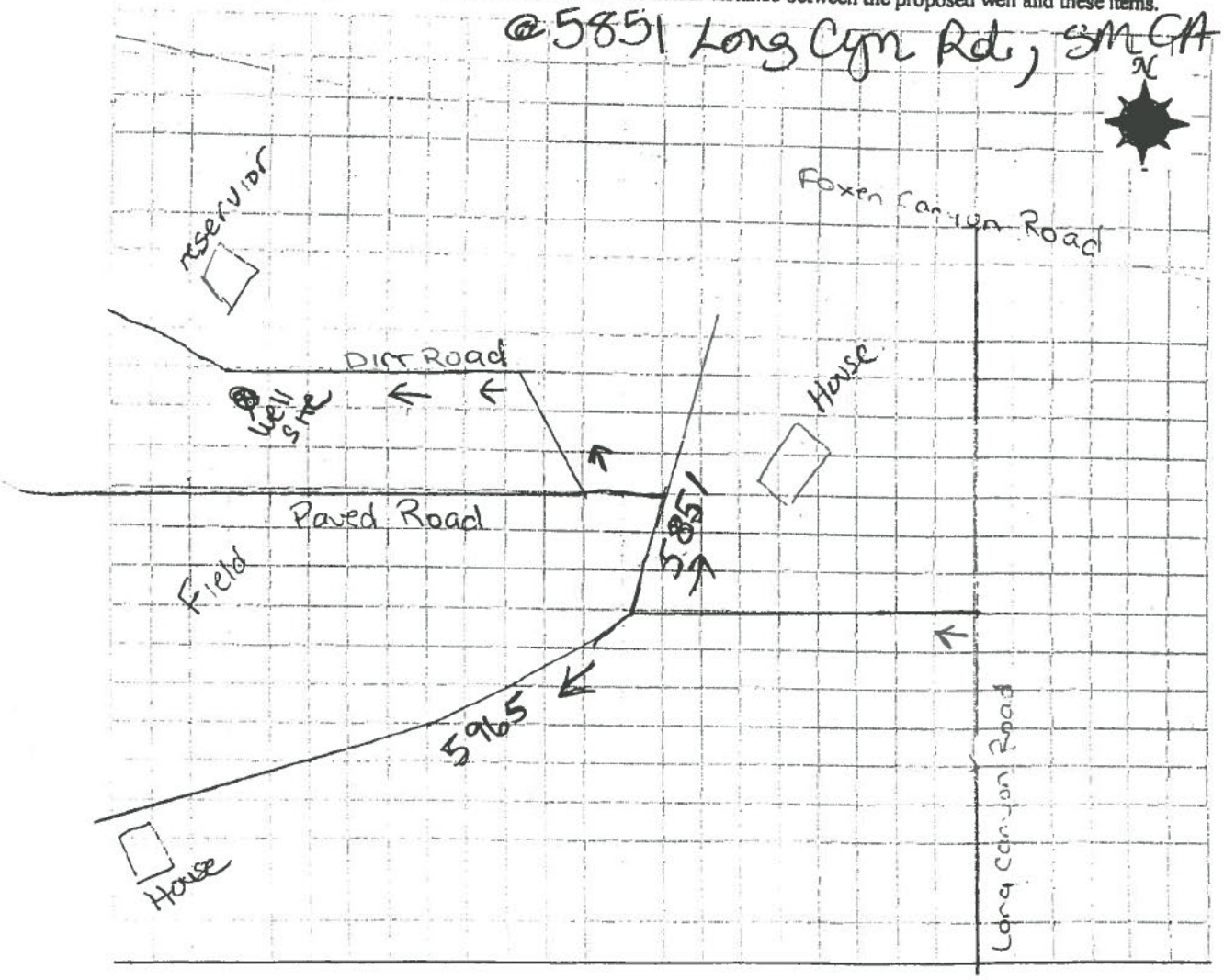
Well Permit Application Plot Plan

(Scale ¼" Block = 20 ft.)

Permit #: WP# 1197-4469

APN: 101-040-021

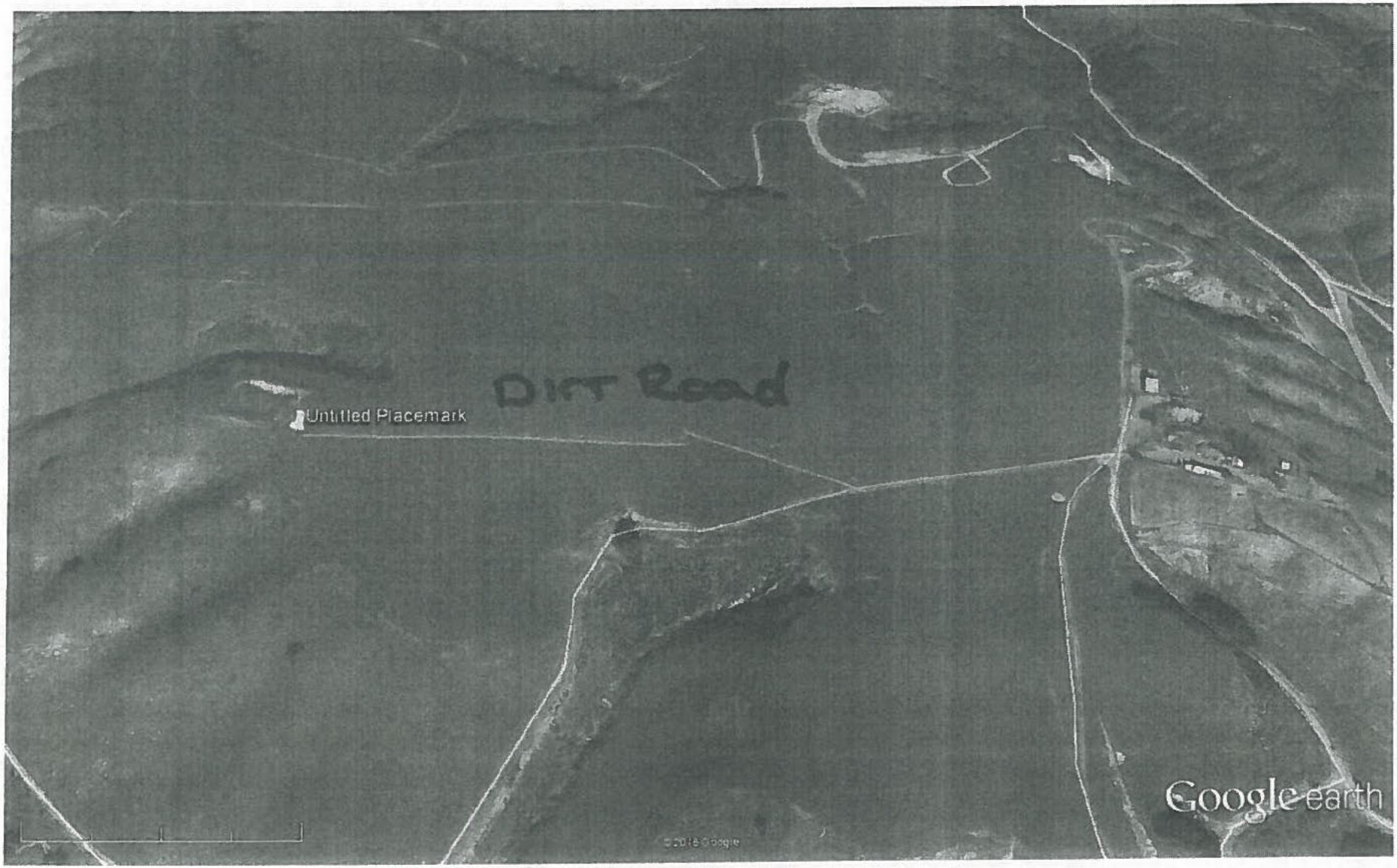
Indicate below the exact location of the proposed well with respect to the following items within 200 ft. of the proposed well: property lines, access roads and easements; existing/proposed structures (surface and subsurface); existing wells; existing/proposed industrial, hazardous, solid waste systems, works or tanks; petroleum product system works or tanks: animal enclosures and/or animal waste storage areas; agricultural operations; watercourses, 100-yr. flood plain and drainage patterns of the property; and well site elevations. Show the actual distance between the proposed well and these items.



Dept. Use Only: Site Reviewed By: _____ **Date:** _____

- ☐ Sewer (Sanitary, Storm or Bldg.) – 50 ft.
- ☐ Septic Tanks and / or Leachlines – 100 ft. (include 100% expansion area)
- ☐ Seepage Pit / Drywell – 150 ft. (include 100% expansion area)
- ☐ Water Bodies / Courses – 50 ft.
- ☐ Underground Petroleum Product Storage Tanks – 100 ft
- ☐ Other: _____

EHS 46-1b (Rev. 07/21/15)



Google earth

feet 1000
meters 300

9N 32W 19H 12 plotted

No NI.

CC161

9N/32W-31

Could not locate

ORIGINAL
File with DWR

3

WATER WELL DRILLERS REPORT

(Sections 7079, 7080, 7081, 7082, Water Code)

THE RESOURCES AGENCY OF CALIFORNIA
DEPARTMENT OF WATER RESOURCES

9N, 32W-31

Do Not Fill In

Nº 39346

State Well No. ~~09N/32W-19G~~

Other Well No.

34 50 36.20
120 16 44.48

19G checked MJ

(2) LOCATION OF WELL:

County Santa Barbara Owner's number, if any

Township, Range, and Section

Distance from cities, roads, railroads, etc. 1 mi. S. of Foxen Canyon Rd. & 4 mi. W. of Long Canyon Rd.

(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: SINGLE ☒ DOUBLE ☐ OTHER:

If gravel packed

From ft.	To ft.	Diam.	Gage or Wall	Diameter of Bore	From ft.	To ft.
0	500	14"	1/4"	24"	0	505

Size of shoe or well ring: Size of gravel:

Describe joint Butt welded

(7) PERFORATIONS OR SCREEN:

Type of perforation or name of screen

From ft.	To ft.	Perf. per row	Rows per ft.	Size in. x in.
118	500	14	2	120 mesh

CONFIDENTIAL - NOT FOR PUBLIC RELEASE

(8) CONSTRUCTION:

Was a surface sanitary seal provided? Yes ☐ No ☒ To what depth 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

(9) WATER LEVELS:

Depth at which water was first found, if known ft.

Standing level before perforating, if known ft.

Standing level after perforating and developing 290 ft.

(10) WELL TESTS:

Was pump test made? Yes ☒ No ☐ If yes, by whom? Floyd Wells

Yield: 1230 gal./min. with 93 ft. drawdown after 4 hrs.

Temperature of water Was a chemical analysis made? Yes ☐ No ☒

Was electric log made of well? Yes ☒ 4.5 No ☐ If yes, attach copy

(11) WELL LOG:

Total depth 505 ft. Depth of completed well 500 ft.

Formation: *Describe by color, character, size of material, and structure*

From	To	
0 ft.	3 ft.	Top soil-sandy
3 "	6 "	Fine sand, gravel and clay
6 "	15 "	Coarse sand & small gravel
15 "	18 "	Brown clay & sand
18 "	45 "	Yellow sandy clay
45 "	48 "	Fine to coarse sand
48 "	58 "	Coarse sand and gravel
58 "	74 "	Yellow clay
74 "	95 "	Coarse sand & gravel
95 "	103 "	Yellow clay
103 "	205 "	Coarse sand and gravel
205 "	220 "	Coarse sand and gravel
220k "	225 "	Yellow clay-sand and gravel
225 "	235 "	Coarse sand and gravel
235 "	255 "	Streaks of coarse sand-gravel and yellow clay
255 "	260 "	Fine to coarse sand
260 "	285 "	Coarse sand & small gravel
285 "	288 "	Yellow sandy clay
288 "	295 "	Fine to coarse sand & small gravel
295 "	308 "	Streaks of yellow clay-sand & gravel
308 "	324 "	Hard packed sand and clay
324 "	331 "	Sand & yellow clay
331 "	335 "	Gray clay
335 "	388 "	Gray sand & gravel
388 "	505 "	Streaks of gray clay-sand & gravel

Work started 9/14 1966, Completed 9/23/66

WELL DRILLER'S STATEMENT:

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

NAME FLOYD V. WELLS, INC.
(Person, firm, or corporation) (Typed or printed)

Address P.O. Box 1007
Santa Maria, California 93454

[SIGNED] [signature]
(Well Driller)

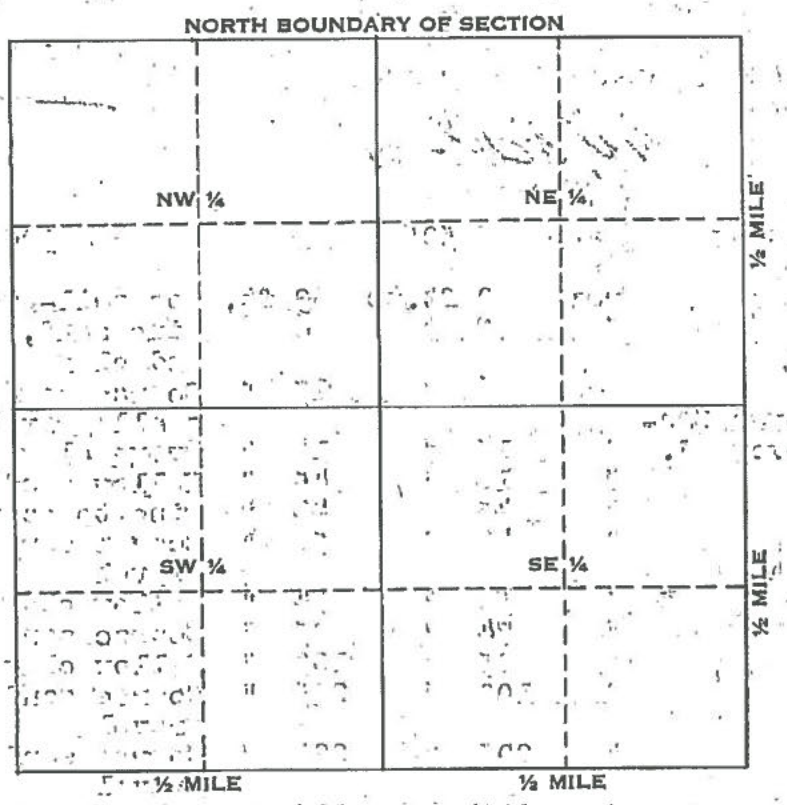
License No. C57-229570 Dated October 28, 1966

SKETCH LOCATION OF WELL ON REVERSE SIDE

DWR 188 (REV. 9-65)

55351-550 10-65 50M TRIP ① △ OSP

WELL LOCATION SKETCH

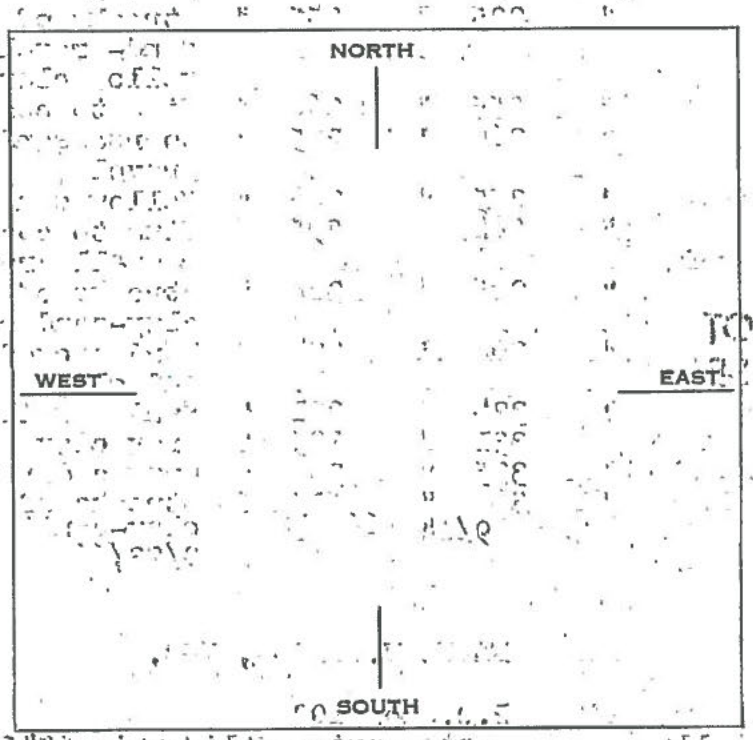


Township _____ N/S

Range _____ E/W

Section No. _____

A. Location of well in sectionized areas.
Sketch roads, railroads, streams, or other features as necessary.



B. Location of well in areas not sectionized.
Sketch roads, railroads, streams, or other features as necessary.
Indicate distances.

CONFIDENTIAL - NOT FOR PUBLIC RELEASE
1996 NOV -3 AM 10: 35

4N 32W 19H2 CC162
101-040-022

34 50 38.74
120 16 48.76

State of California

Well Completion Report

WCR Form Submitted 07/05/2016
WCR2016-004584

Owner's Well Number: SHANE CLEMENT #2 | Date Work Began: 05/30/2016 | Date Work Ended: 06/09/2016

Local Permit Agency: Santa Barbara County Environmental Health Services

Secondary Permit Agency: | Permit Number: 0001111 | Permit Date: 03/22/2016

Well Owner (must remain confidential pursuant to Water Code 13752)

Name [redacted]
Mailing
City

(b) (6)

Planned Use and Activity

Activity: New Well

Planned Use: Water Supply Domestic

Well Location

Address: 5965 Long Canyon RD
City: Santa Maria | Zip: 93454 | County: Santa Barbara

Latitude: Deg. Min. Sec. N | Longitude: Deg. Min. Sec. W

Dec. Lat. | Dec. Long.

Vertical Datum | Horizontal Datum: WGS84

Location Accuracy | Location Determination Method

APN: 101040022
Township
Range
Section
Baseline Meridian
Ground Surface Elevation
Elevation Accuracy
Elevation Determination Method

Borehole Information

Orientation: Vertical | Specify

Drilling Method: Direct Rotary | Drilling Fluid: Water

Total Depth of Boring: 500 Feet

Total Depth of Completed Well: 500 Feet

Water Level and Yield of Completed Well

Depth to first water: 385 (Feet below surface)

Depth to Static Water Level: 445 (Feet) | Date Measured: 07/01/2016

Estimated Yield*: 2 | Test Type: Pump

Test Length: 1 | Total Drawdown: (Feet)

*May not be representative of a well's long term yield.

Geologic Log - Lite

Depth from Surface Feet	to Feet	Material Type	Material Color	Material Texture	Material Description
0	5	Soil or Organic		Hard	Top Soil/Hard Rock
5	20	Clay	Brown		
20	30	Clay			
30	80	Rock	Brown		
80	100	Sand		Coarse	Coarse Sand & Gravel
100	170	Sand		Coarse	Coarse Sand & Gravel
170	180	Sandstone	Tan		
180	200	Sand		Coarse	Coarse Sand & Small Gravel
200	210	Sand		Clayey	
210	250	Sandstone	Tan		
250	280	Clay		Sandy	
280	335	Sandstone			
335	360	Clay			
360	380	Sandstone			
380	400	Clay			
400	420	Sandstone			
420	450	Clay			
450	500	Sand		Coarse	

Casings

Casing #	Depth from Surface Feet	to Feet	Casing Type	Material	Casings Specifications	Wall Thickness (inches)	Outside Diameter (inches)	Screen Type	Slot Size if any (inches)	Description
1	0	240	Blank	Other	N/A	0.329	6.9			
1	240	260	Screen	PVC	N/A	0.329	6.9	Milled Slots	40	
1	260	420	Blank	PVC	N/A	0.329	6.9			
1	420	500	Screen	PVC	N/A	0.329	6.9	Milled Slots	40	

Annular Material

Depth from Surface Feet	to Feet	Fill	Fill Type Details	Filter Pack Size	Description
0	50	Cement	10.3 Sack Mix	10 SAC SLURRY	Seal
50	500	Filter Pack	Other Gravel Pack		lapis 3

Other Observations:

Borehole Specifications

Depth from Surface Feet	to Feet	Borehole Diameter (inches)
0	500	14

Certification Statement

I, the undersigned, certify that this report is complete and accurate to the best of my knowledge and belief

Name: COAST DRILLING INC
Person, Firm or Corporation

P O BOX 1308 — Address
GROVER BEACH — City
CA — State
93483 — Zip

Signed: Robert Haytock
C-57 Licensed Water Well Contractor

07/05/2016 — Date Signed
905479 — C-57 License Number

Attachments

maps for shane clement pdf - Location Map

DWR Use Only

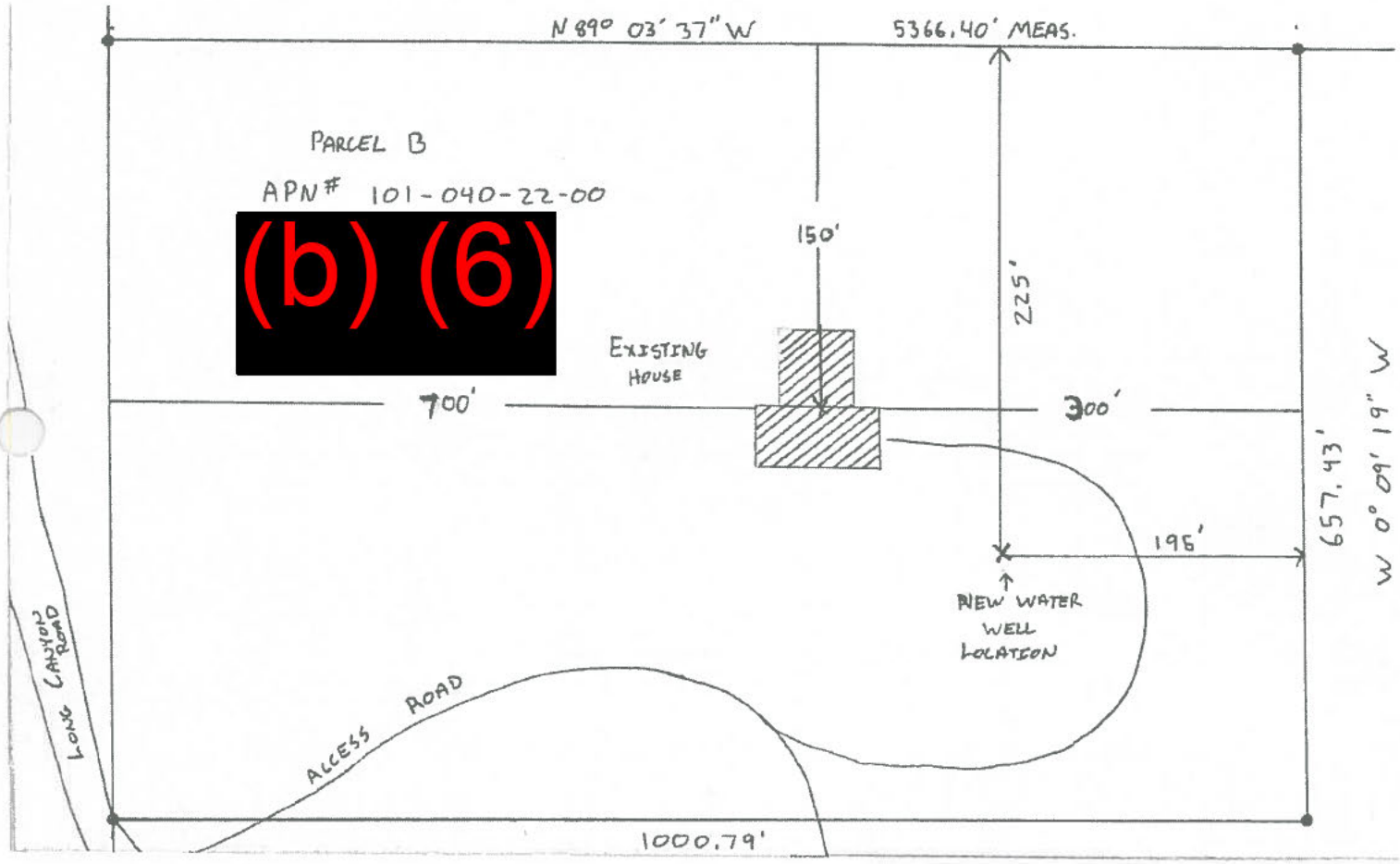
Site Number / State Well Number

Latitude Deg/Min/Sec: N

Longitude Deg/Min/Sec: W

TRS:

APN:


N 89° 03' 37" W
5366.40' MEAS.
PARCEL B
APN# 101-040-22-00
(b) (6)
150'
225'
EXISTING HOUSE
700'
300'
657.43'
W 0° 09' 19" W
196'
NEW WATER WELL LOCATION
LONG CANYON ROAD
ACCESS ROAD
1000.79'

Santa Barbara County
PUBLIC Health
DEPARTMENT

Environmental Health Services
225 Camino del Remedio, Santa Barbara, CA. 93110 ◆(805) 681-4900
2125 S. Centerpointe Pkwy., #333 ◆ Santa Maria, CA 93455-1340 ◆ (805) 346-8460

WATER WELL PERMIT APPLICATION

WP# 1590

FOR OFFICE USE ONLY
Rec'd Date: 10-12-16
Rec'd By: [illegible]
WP # 0001590
District # 208

Type of Permit *(Please check the appropriate box below)*

☒	Construction	$740 (3 hrs.) *	[4669]	New or Replacement well.
☐	Modification	$740 (3 hrs.) *	[4669]	Includes the deepening of a well, reperforation, sealing or replacement of well casing.
☐	Destruction	$495 (2 hrs.) *	[4668]	Abandonment: The complete filling of a well.

✱ *An hourly fee of $136 will be added for those projects that require staff time in excess of that noted above. Final project approval will not be issued until all fees are paid.*

Required Attachments: Plot plan indicating the location of the well with respect to the following items:

- ☐ Property lines.
- ☐ Drainage pattern of the property.
- ☐ Access roads and easements (water, sewer, utility, roadway).
- ☐ Existing and/or proposed structures.
- ☐ Existing wells within a 100 foot radius of the proposed well.
- ☐ Animal or fowl enclosure, pens, paddocks, stockyards within a 100 foot radius of proposed well site
- ☐ Sewage disposal systems or works carrying or containing sewage or industrial wastes within a 200 foot radius of the proposed well.
- ☐ All perennial, seasonal, natural, or artificial water bodies or watercourses, including location of 100 year floodplain, if applicable.
- ☐ Also Required: the Supplemental Form on page 3, completed in full.

OWNER Info:

Well Owner Name (Required): [redacted]

Owner Mailing Address: [redacted]

(b) (6)

Complete this section if APPLICANT is other than Well Owner

Applicant/ Project Coordinator Name: Roberta Haylak - Coast Drilling Inc

Mailing Address: P.O. Box 1308 (Street Number and Name) Grover Beach (City) CA 93483 (State / Zip Code)

Primary Phone: (805) 717-9367 Email: coastdrilling@yahoo.com

WELL Location Info:

Well Location Address: 5965 Long Canyon Road (Street Number and Name) Santa Maria (City) CA 93454 (State / Zip Code)

Cross Street (or other information defining the Well location, if applicable): Foxen Canyon Road

Assessor's Parcel Number (APN): 101-040-022 Longitude: ____ Latitude: ____ Elevation: ____

A. Is parcel located within the service area of a public water system? ☒ No ☐ Yes (Identify): ____

A-1. If you answered Yes to question A.: Are you connected to the Public Water System (i.e., do you have a meter?) ☐ No ☐ Yes

A-2. If you answered No to the question A-1.: Is public water service available? ☒ No ☐ Yes

Proposed Depth 700 ft. Well Bore Diam. 6 in. **Sealing Material (Check)** ☐ Neat Cement ☐ Clay ☐ Cement Grout ☒ Concrete	**Casing Information** Type: ☐ Steel ☒ PVC ☐ Other ____ Wall / Gauge SDR 21 in. Diameter 6 in. Annular Seal Depth 50 ft. Additional Work Description: ____ **Note**: A minimum 50 ft. annular seal is required for all wells.

LEGAL DECLARATION

WP#1590

LICENSED CONTRACTOR DECLARATION

I hereby affirm that I am licensed under the provisions of Chapter 9 (commencing with Sec. 7000), Division 3 of the Business and Professions Code (B&PC) as a well drilling contractor (C-57 license) and such license is in full force and effect.

Roberta Haylock (Print Name of Driller) Roberta Haylock (Signature of Driller) 10-7-16 (Date)

Lic. No.: 905479 Primary Telephone 805 7179367 Other Phone: 805 904-6622

Business Name: Coast Drilling Address P.O. Box 1308 Grover Beach, CA 93483

(Complete A *or* B)

A. WORKERS' COMPENSATION DECLARATION

I hereby affirm that (check the applicable box):

- ☐ I have and will maintain a certificate of consent to self-insure for workers' compensation, as provided for by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued.
- ☐ I have and will maintain workers' compensation insurance, as provided for by Section 3700 of the Labor Code, for the performance of work for which this permit is issued. My insurance carrier and policy number are:

Carrier _____ Policy No. _____

Applicant Signature _____ Date _____

B. CERTIFICATION OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

I certify that in the performance of work for which this permit is issued, I shall not employ any person in a manner so as to become subject to the Workers' Compensation Laws of California.

Applicant Signature Roberta Haylock Date 10-7-16

Notice to Applicant: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

When signed by the Environmental Health Specialist, this application shall be deemed a permit only for the work described and is not a "permit for development" as that term is used in the California Subdivision Map Act. Please note additional permits (e.g., electrical installation, waste discharge requirements, land use clearance, grading) may also be required from other agencies. THIS PERMIT SHALL EXPIRE upon completion of the task authorized or one year from date of issuance, whichever occurs first. No changes from the approved plan are permitted without prior written approval by Environmental Health Services. Final clearance will not be issued until all fees are paid and a copy of the drillers log is submitted to Environmental Health Services.

I hereby agree to comply with all regulations of the County of Santa Barbara pertaining to well construction, repair, modification, destruction and inactivation. The property owner, well driller, or agent will furnish Environmental Health Services a copy of a completed well log upon completion of well construction.

I certify that I have read this application and declare under penalty of perjury that the information contained herein is true, correct and complete. I hereby authorize representatives of Environmental Health Services to enter the premises for the purpose of inspecting the site and work described herein for compliance with county requirements.

REQUIRED INSPECTIONS / FINAL CLEARANCE: After permit approval, and prior to covering any components, an inspection must be scheduled directly with the approving Environmental Health Specialist at least two (2) business days in advance for:

- ✓ The sealing of the annular space on a well;
- ✓ The destruction of wells;
- ✓ Any operation stipulated on the permit to address special or unusual conditions.
- ✓ Receipt of driller's well log.

Signed Roberta Haylock (Applicant (Print Name)) Roberta Haylock (Applicant's Signature) 10-7-16 (Date)

APPLICATION DISPOSITION: ☒ Approved ☐ Denied

Signed Deanna Taverio (Environmental Health Specialist) 10/21/16 (Date)

FOR DEPARTMENT USE ONLY

2070638

Fixed Fee Rec'd: by: Velich Date: 10-12-16 Amt: $ 740.- Credit Card: ☐ Check/Receipt/Trans. No.: 26442

Date plans resubmitted (1) _____ (2) _____ (2) _____

Permit Conditions: contact EHS prior to seal, at least 48 hr notice

Final Construction Approved by: _____ Date: _____

Final Clearance by: _____ Date: _____

☐ Copy Required at Assessor's Office ☐ Copy Required at Water District Office

Santa Barbara County
PUBLIC Health
DEPARTMENT

Environmental Health Services

225 Camino Del Remedio, Santa Barbara, CA. 93110 ♦(805) 681-4900
2125 S. Centerpointe Pkwy., #333 ♦ Santa Maria, CA 93455-1340 ♦ (805) 346-8460

ENVIRONMENTAL HEALTH SERVICES DIVISION
WELL PERMIT FIELD INVESTIGATION RECORD

Well Permit Application Received: **Date:** 10/12/16 **Well Permit Number:** ~~SR~~ WP 1590

Owner _____ APN 101/040/022

Site Investigation by: DTalenco Date: _____

Findings: (Check Applicable Boxes and Give Clearance)

☐ Overhead Powerlines _____
☐ Sewer Lines _____ (> 50 feet)
☐ Leachfield/Septic Tank _____ (> 100 feet)
☐ Cesspool/Drywell _____ (> 150 feet)
☐ Animal Enclosures _____ (100 Feet)
☐ Creek/Watercourse _____ (100 yr Floodplain)
☐ Petroleum Tank/Pipeline _____ (50 feet)
☐ Other _____

Comments: _____

Construction Inspection Record:

Date: 3/15/17 Driller Coast Drilling ☐ **Destruction:**

Registered Professional _____

Casing Depth Below Grade: _____
Depth of Seal: _____

Casing Information:

Diameter 6" ☐ Gage SDR ~~11~~

☐ Steel ☐ Standard linepipe ☐ Structural Steel

☐ ABS ☒ PVC ☐ Standard 14 NSF

☐ Other: _____

Borehole:

Total Depth of Well: 720 ft

Annular Seal: 49 ft
(20' Ag & SPWS; 50' >5 conn. & commercial)

Well Bore Diameter: 12 1/4"

Sealing Material: 6 Sack cement
(6 Sack concrete, neat cement, sand-cement, Bentonite, thermoset plastic concrete)

Amount: 4 yrds

Method of Pour: ☐ Gravity or ☒ Pumper

Use of Tremie Pipe: ☒ Yes ☐ N/A
Required if wet or > 30 ft deep

Casing Schedule:			TYPE	Conductor Casing:
0 ft.	- 520	=	Bank	Borehole:- _____
520	- 720	=	Screen	Sealing Material: _____
_____	- ___	=	_____	Conductor Casing:
_____	- ___	=	_____	Depth: _____ Diameter _____
_____	- ___	=	_____	Capped _____

Water Well Application

Supplemental Information

General:

If application is for Modification to an existing well, state the nature of modification:

☐ Deepening ☐ Sealing of well casing
☐ Reperforation ☐ Replacement of well casing

WP# 1590_4669
101-040-022
@ 5965 Long Canyon Rd.
SM CA
93454

Intended Well Use: *(check all that apply)*

Check the well type from the list below.

☐ Irrigation ☐ Irrigation and Domestic* ☒ Domestic* Only

* *Indicate type of Domestic use:* ☒ Single Parcel ☐ Multi-Parcel ☐ State Small ☐ Public

What is the anticipated approximate water production (acre feet per year) for the proposed well?: ☐ <2; ☐ 2-10; ☐ >10

Intended Water Use:

Do you intend to export any water off of the property? ☒ No ☐ Yes

What other water sources are available on the property? ☐ Public ☒ Private ☐ None

Site Information:

Are there other wells on the property? ☒ No ☐ Yes If yes, how many? _____

What is the parcel size of the proposed well location? _____ acres☐ square feet☐ *(check one)* see map

What is the Property Zoning Designation?

☐ AG-I ☐ AG II ☒ Residential ☐ Commercial ☐ Industrial ☐ Recreational

Is the proposed well location within the Coastal Zone? ☐ No ☐ Yes

Within what Ground Water Basin is the proposed well located? *(check the box above the appropriate column)*

☐ South Coast Groundwater Basins	☐ Santa Ynez River Watershed	☐ North Coastal Groundwater Basins	☐ Cuyama Groundwater Basin
Carpinteria	*Santa Ynez Uplands*	*San Antonio*	
Montecito	*Santa Ynez Alluvial*	*Santa Maria*	
Santa Barbara	*Buellton Uplands*		
Foothill	*Lompoc Groundwater Basins*		
Goleta			

Terms for Permit:

Initial each statement below to indicate that you understand and agree; then sign bottom of this page.

RH I have read and understand all of the information on Page 2 of this application including, but not limited to, permit limitations.

RH I understand that this permit is only for the well construction, modification or destruction identified on this application.

RH I have read and understand that other permits may be required, including (but not limited to): land use; electrical; grading; waste discharge; etc.

Signed Robert Haylock (Applicant/Owner (Print Name)) Robert Haylock (Applicant/Owner Signature) 10-7-16 (Date)

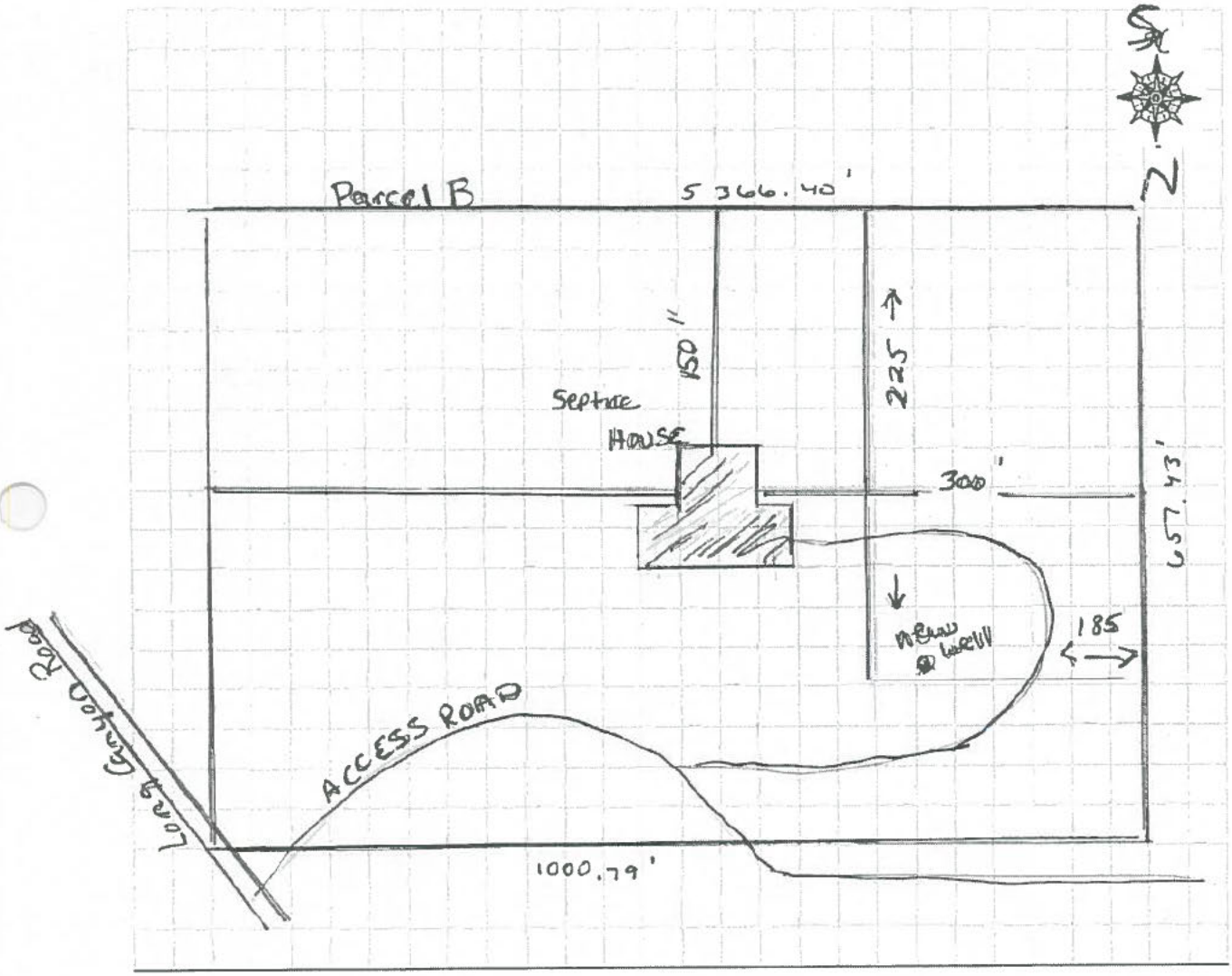
Well Permit Application Plot Plan

(Scale ¼" Block = 20 ft.)

Permit #: WP#1590

APN: 101-040-022

Indicate below the exact location of the proposed well with respect to the following items within 200 ft. of the proposed well: property lines, access roads and easements; existing/proposed structures (surface and subsurface); existing wells; existing/proposed industrial, hazardous, solid waste systems, works or tanks; petroleum product system works or tanks: animal enclosures and/or animal waste storage areas; agricultural operations; watercourses, 100-yr. flood plain and drainage patterns of the property; and well site elevations. Show the actual distance between the proposed well and these items.



Dept. Use Only: Site Reviewed By: _____ **Date:** _____

☐ Sewer (Sanitary, Storm or Bldg.) – 50 ft.

☐ Septic Tanks and / or Leachlines – 100 ft. (include 100% expansion area)

☐ Seepage Pit / Drywell – 150 ft. (include 100% expansion area)

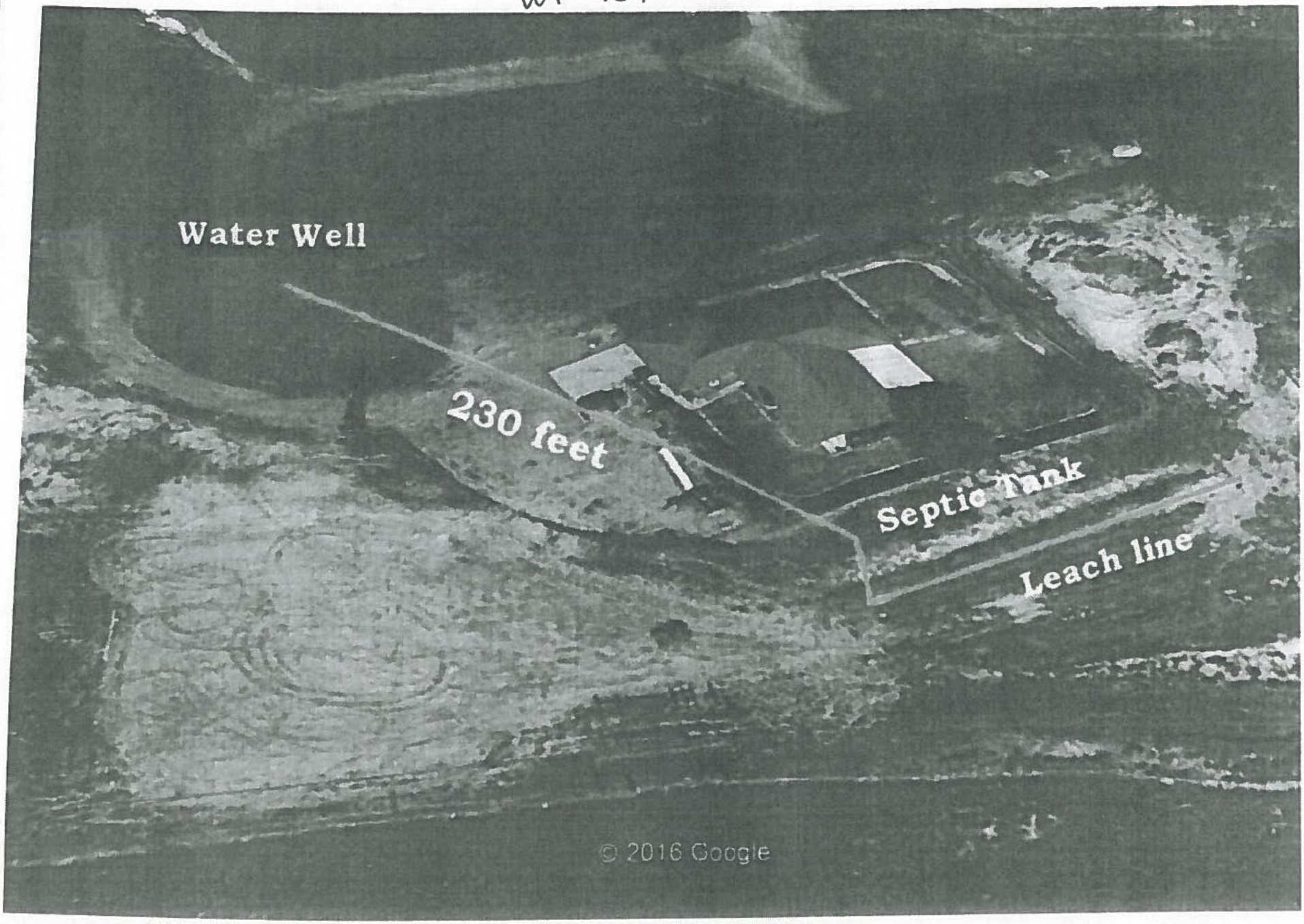
☐ Water Bodies / Courses – 50 ft.

☐ Underground Petroleum Product Storage Tanks – 100 ft

☐ Other: _____

EHS 46-1b (Rev. 07/21/15)

WP#1590_4669



9N 32W 20

9N 32W 20A 101-050-003 CC165 #465

TRIPLICATE
Retain this copy

STATE OF CALIFORNIA
THE RESOURCES AGENCY
DEPARTMENT OF WATER RESOURCES

WATER WELL DRILLERS REPORT

Do Not Fill In

№ 105191

State Well No.

Other Well No.

(1) OWNER:

Name Jack Parson c/o Western Pre-Cooling

Address P. O. Box 365
Guadalupe, Ca 93434

(2) LOCATION OF WELL:

County Santa Barbara Owner's number, if any

Township, Range, and Section

Distance from cities, roads, railroads, etc. 7/16 mi N of Foxen-Canyon Rd up
Olivera Canyon, 13' E of easement Rd

(3) TYPE OF WORK (check):

New Well [X] Deepening [ ] Reconditioning [ ] Destroying [ ]

If destruction, describe material and procedure in Item 11.

(4) PROPOSED USE (check):

Domestic [X] Industrial [ ] Municipal [ ]
Irrigation [X] Test Well [ ] Other [ ]

(5) EQUIPMENT:

Rotary [X]
Cable [ ]
Other [ ]

(6) CASING INSTALLED:

STEEL: X OTHER:
SINGLE [X] DOUBLE [ ]

If gravel packed

From ft.	To ft.	Diam.	Gage or Wall	Diameter of Bore	From ft.	To ft.
0	385	8 5/8	.250	15	50	385

Size of shoe or well ring: Size of gravel: 30% 3/8

Describe joint butt 70% 1/4 x 1/8

(7) PERFORATIONS OR SCREEN:

Type of perforation or name of screen vertical slot

From ft.	To ft.	Perf. per row	Rows per ft.	Size in. x in.
209	385		8	.125 x 2½

(8) CONSTRUCTION:

Was a surface sanitary seal provided? Yes [X] No [ ] To what depth 50 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 top 50' cement seal

(9) WATER LEVELS:

Depth at which water was first found, if known 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: 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

(11) WELL LOG:

Total depth ft. Depth of completed well ft.

Formation: *Describe by color, character, size of material, and structure*

ft. to ft.

SEE ATTACHED LOG

Work started 2/28 19 77, Completed 3/4 19 77

WELL DRILLER'S STATEMENT:

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

NAME Floyd V. Wells, Inc
(Person, firm, or corporation) (Typed or printed)

Address P. O. Box 1007
Santa Maria, Ca 93454

[SIGNED] [signature]
(Well Driller)

License No. C57-229570 Dated March 16, 19 77

SKETCH LOCATION OF WELL ON REVERSE SIDE

DWR 188 (REV. 9-66)

67139-750 8-72 30M TRIP ① T OSP

SANTA MARIA, CALIFORNIA

FLOYD V. WELLS, INC.

GOLETA, CALIFORNIA

WATER WELL DRILLING LOG

Owner: Jack Parson Company:

Well No: #1 Rig: #7

Location of Well: 7/16 mi N of Foxen-Canyon Rd up Olivero Canyon
13' E of easement rd

Surface Pipe or Seal: 50' cement seal Size: Depth: Gauge:

Well Bore Diameter: 15" Depth of Casing Set: 385'

Casing Size: 8 5/8" Gauge: .250 Type: steel

Perforations: Size: .125 x 2½ Type: Vertical slot Number: 8 rows

Perforation Location from Ground Level: From: G.L. To: 209 - blank
209 385 - perf

Gravel Pack: Type: dumped Size: 70% 1/4 x 1/8; 30% 3/8 Quantity: 14 ton

Bits: No. Used. 2 Size: (1) 9 7/8; (1) 15

Drilling Method: Air: Foam: Mud: X

Material Used: Gel: 20 P 95: 5 2 sks cement Foam:

Well Started: 2/28/77 Well Completed: 3/4/77 Driller: D. Pittman

TEST PUMPING INFORMATION

Production Test:

Standing Water Level: Pumping Level:

G.P.M.: Pumping Level

REMARKS:

Ken Verbees, Printers, Lithographers - Santa Maria, CA

SANTA MARIA, CALIFORNIA

FLOYD V. WELLS, INC.

GOLETA, CALIFORNIA

FORMATION LOG

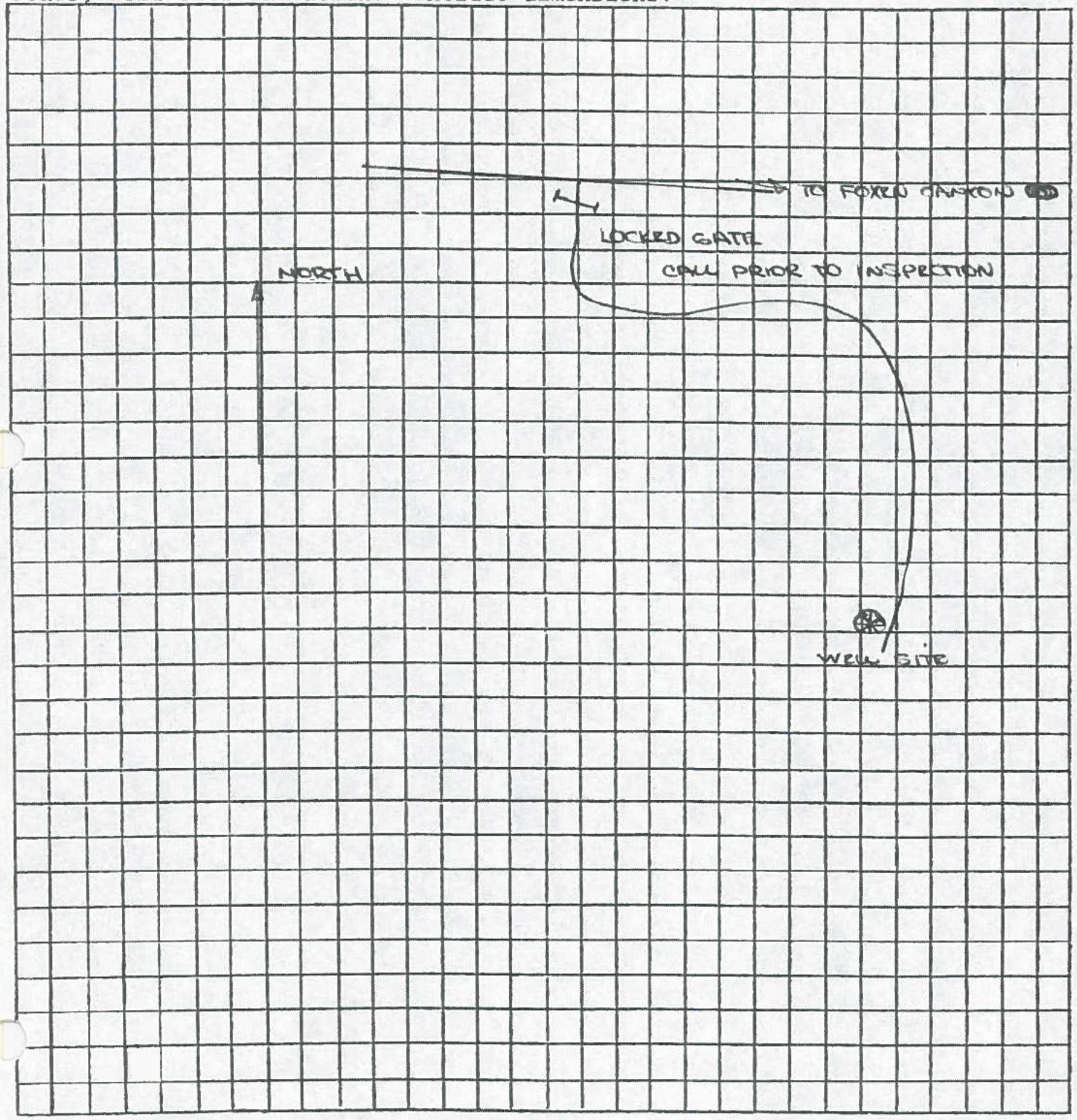
Jack Parson - #3014

FROM	TO	DESCRIPTION
0	4	Top soil, sandy brown clay
4	9	Coarse sand and gravel
9	26	Gravel with yellow sandy clay
26	31	1/4 x 1/2 gravel with fine sand
31	120	Fine and coarse sand with some gravel
120	125	Yellow sandy clay
125	265	Fine and coarse sand and gravel with clay lenses
265	281	Light brown clay
281	326	Fine and coarse sand some gravel
326	380	Coarse sand and gravel
380	383	Blue gray fine and coarse sand
383	385	Blue gray sandy clay

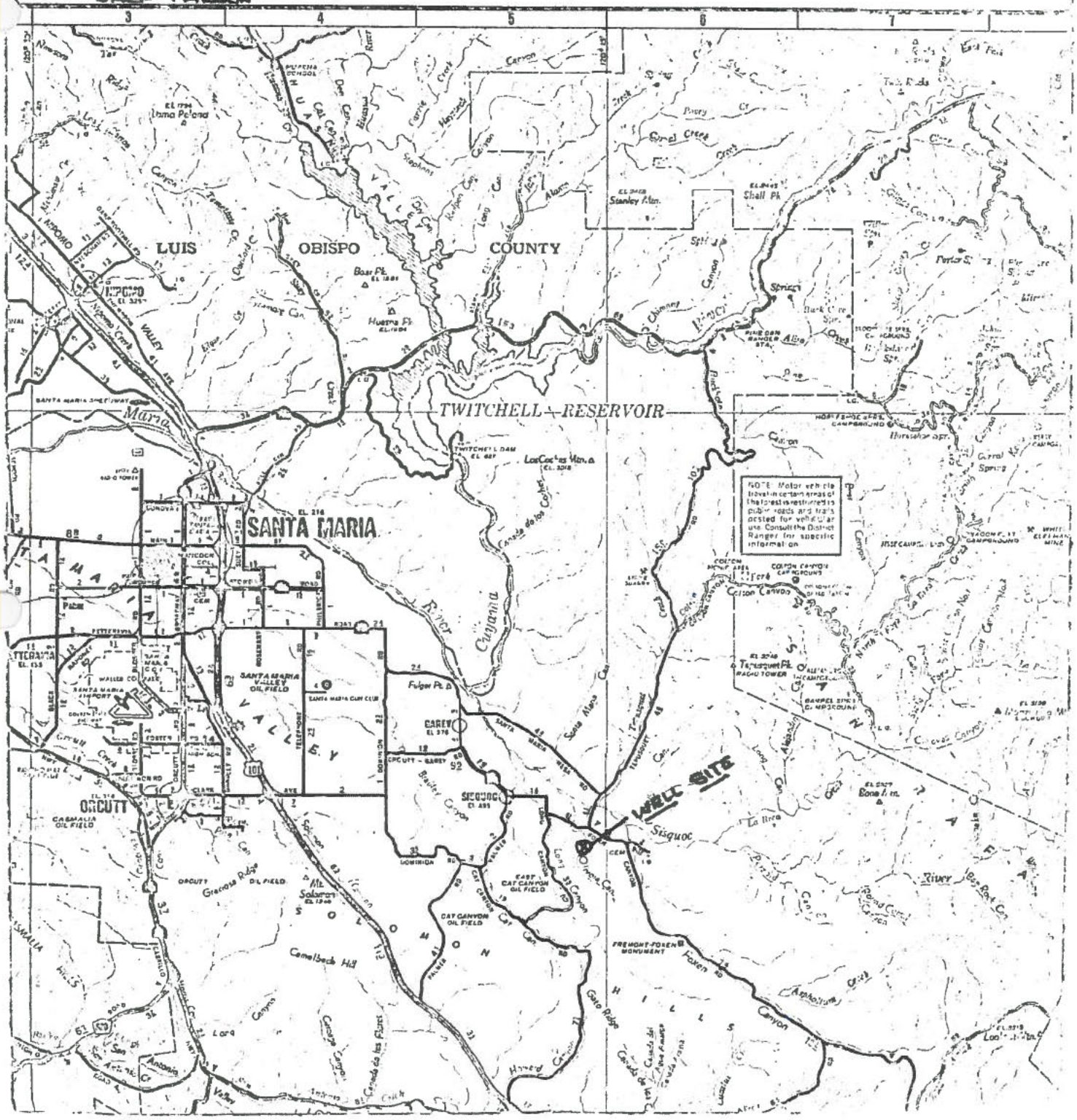
Ken Vertrees Printing Lithographing Santa Maria CA

WELL PERMIT APPLICATION
Plot Plan
Scale: 1/4" = 20'

Indicate below the exact location of the well with respect to the following items within 200' of the well: Property lines, sewers and private sewage systems, water bodies on watercourses, drainage pattern, existing wells, access roads, well site elevation. Include dimensions.



JACK PARSON


LUIS OBISPO COUNTY
TWITCHELL RESERVOIR
SANTA MARIA
ORCUTT
CAREY
SISQUOC
WELL SITE
Santa Maria River
Cuyama
Sisquoc River
Stanley Mtn.
Shell Pk.
Boar Pk.
Huasna Pk.
Tinta Peloma
Fulgor Pk.
Mt. Solomon
Camelback Hill
Gato Ridge
Cat Canyon Oil Field
East Cat Canyon Oil Field
Santa Maria Valley Oil Field
Orcutt Gracios Ridge Oil Field
Casmalia Oil Field
Santa Maria Airport
Santa Maria Gun Club
Twitchell Dam
Los Coches Mtn.
Colson Canyon
Colson Canyon Campground
Horseshoe Campground
Pine Cone Ranger Sta.
Fremont-Folsen Monument
Bone Mtn.
Tepesquet Pk.
Radio Tower
Santa Maria Speedway
Nipomo
Nipomo Creek
Nipomo Valley
Santa Maria Valley
Solomon Hills
Tepesquet Canyon
Santa Maria Mesa
Cuyama Valley
Cuyama Mtns.
Cuyama River
Sisquoc River
Big Rock Cr.
Alamo Creek
Cuyama Creek
Canada de los Coches
Canada de los Flores
Canada del Cuyamas
Cuyama Canyon
Tepesquet Canyon
Gato Ridge
Howard Canyon
Amphitrite Creek
Lopez Canyon
Lopez Creek
Lopez Valley
Santa Maria Mesa
Sisquoc Canyon
Sisquoc Creek
Cat Canyon
Palmer Canyon
Dominica
Foxen Canyon
Porter S.
Horseshoe Sp.
Cuyama Spring
Black Cave Spring
Spring
Tepesquet Pk.
Bone Mtn.
Loo Mtn.
Antonio Creek
San Antonio Creek
Tepesquet Canyon
Cuyama Canyon
Cuyama Mtns.
Santa Maria Mesa
Sisquoc River
Big Rock Cr.
Alamo Creek
Cuyama Creek
Canada de los Coches
Canada de los Flores
Canada del Cuyamas
Cuyama Canyon
Tepesquet Canyon
Gato Ridge
Howard Canyon
Amphitrite Creek
Lopez Canyon
Lopez Creek
Lopez Valley
Santa Maria Mesa
Sisquoc Canyon
Sisquoc Creek
Cat Canyon
Palmer Canyon
Dominica
Foxen Canyon
Porter S.
Horseshoe Sp.
Cuyama Spring
Black Cave Spring
Spring
Tepesquet Pk.
Bone Mtn.
Loo Mtn.
Antonio Creek
San Antonio Creek
NOTE: Motor vehicle travel in certain areas of the forest is restricted to public roads and trails posted for vehicular use. Consult the District Ranger for specific information.

Permit No. 465

Page ___ of ___ pages

ENVIRONMENTAL HEALTH DIVISION
SANTA BARBARA COUNTY HEALTH DEPARTMENT
WELL PERMIT FIELD INVESTIGATION RECORD

Well Permit Application Received: Date 2/2/77

Site Investigation: By Arnold Zwicky Date 2/7/77

Findings: Well site is in bottom of canyon below homesite. Will lift water approx. 130 feet to storage at building. Recommended casing well pad about 12 to 18 inches to prevent flooding in the event of heavy rains

Application Reviewed and Approved: By Arnold Zwicky Date 2/7/77

Work Investigation Record

Findings: 3/15/77 Observed sealing of well. Grout pumped into well sealing to approximately 56 feet. G.M.F. 9:00 a.m. to 10:00 a.m.

Final Inspection and Approval/Denial: By Arnold Zwicky Date 4/15/77

Notice of Work Acceptance/Rejection Sent to Well Owner On 4/15/77.

H-95 10/75

CC167 4N 32W 20E 1

ORIGINAL 09N32W20
File with DWR

STATE OF CALIFORNIA
WELL COMPLETION REPORT
Refer to Instruction Pamphlet
No. 1082558

Page ___ of ___
Owner's Well No. 2
Date Work Began 3-17-09, Ended 4-13-09
Local Permit Agency Santa Barbara Co
Permit No. SR0105814 Permit Date 9-17-08

DWR USE ONLY — DO NOT FILL IN
STATE WELL NO./STATION NO.
LATITUDE LONGITUDE
APN/TRS/OTHER

GEOLOGIC LOG

ORIENTATION (✓) X VERTICAL ___ HORIZONTAL ___ ANGLE ___ (SPECIFY)
DRILLING METHOD Rotary FLUID Mud

DEPTH FROM SURFACE Ft.	to Ft.	DESCRIPTION *Describe material, grain size, color, etc.*
0	25	Brown Sand
25	35	Brown Clay With Gravel
35	80	Geavel
80	116	Brown Sand
116	130	Small Gravel With White Clay
130	185	Small Gravel With Brown Sand
185	215	Brown Clay With Sand Streaks
215	360	Small Gravel & Brown Sand
360	425	Brown Clay With Sand Streaks
425	500	Course Brown Sand
500	515	Brown Clay
515	620	Blue Sand

TOTAL DEPTH OF BORING 620 (Feet)
TOTAL DEPTH OF COMPLETED WELL 600 (Feet)

WELL OWNER

Name 34 So 51.90
Mailing
City 120 B' 59.40"

WELL LOCATION

Address 5911 Olivera Cyn
City Santa Maria Calif 93454
County Santa Barbara Co
APN Book ___ Page ___ Parcel 101-050-040
Township ___ Range ___ Section ___
Lat ___ N DEG. MIN. SEC. Long ___ W DEG. MIN. SEC.

LOCATION SKETCH

Illustrate or Describe Distance of Well from Roads, Buildings, Fences, Rivers, etc. and attach a map. Use additional paper if necessary. PLEASE BE ACCURATE & COMPLETE.

ACTIVITY (✓)

X NEW WELL
MODIFICATION/REPAIR
___ Deepen
___ Other (Specify)
___ DESTROY *(Describe Procedures and Materials Under "GEOLOGIC LOG")*

USES (✓)
WATER SUPPLY
X Domestic ___ Public
___ Irrigation ___ Industrial
MONITORING ___
TEST WELL ___
CATHODIC PROTECTION ___
HEAT EXCHANGE ___
DIRECT PUSH ___
INJECTION ___
VAPOR EXTRACTION ___
SPARGING ___
REMEDIATION ___
OTHER (SPECIFY) ___

WATER LEVEL & YIELD OF COMPLETED WELL

DEPTH TO FIRST WATER ___ (Ft.) BELOW SURFACE
DEPTH OF STATIC WATER LEVEL 359 (Ft.) & DATE MEASURED 4-13-09
ESTIMATED YIELD* 80 (GPM) & TEST TYPE Air
TEST LENGTH 2 (Hrs.) TOTAL DRAWDOWN ___ (Ft.)
** May not be representative of a well's long-term yield.*

CASING (S)

DEPTH FROM SURFACE Ft.	to Ft.	BORE-HOLE DIA. (Inches)	TYPE (✓) BLANK	SCREEN	CON-DUCTOR	FILL PIPE	MATERIAL / GRADE	INTERNAL DIAMETER (Inches)	GAUGE OR WALL THICKNESS	SLOT SIZE IF ANY (Inches)
0	460	11	X				PVC	5	SDR-21	
460	600	11		X			PVC	5	Sdr-21	040

ANNULAR MATERIAL

DEPTH FROM SURFACE Ft.	to Ft.	TYPE CE-MENT (✓)	BEN-TONITE (✓)	FILL (✓)	FILTER PACK (TYPE/SIZE)
0	50	X			
					8x16

ATTACHMENTS (✓)

___ Geologic Log
___ Well Construction Diagram
___ Geophysical Log(s)
___ Soil/Water Chemical Analyses
___ Other ___

ATTACH ADDITIONAL INFORMATION, IF IT EXISTS.

CERTIFICATION STATEMENT

I, the undersigned, certify that this report is complete and accurate to the best of my knowledge and belief.

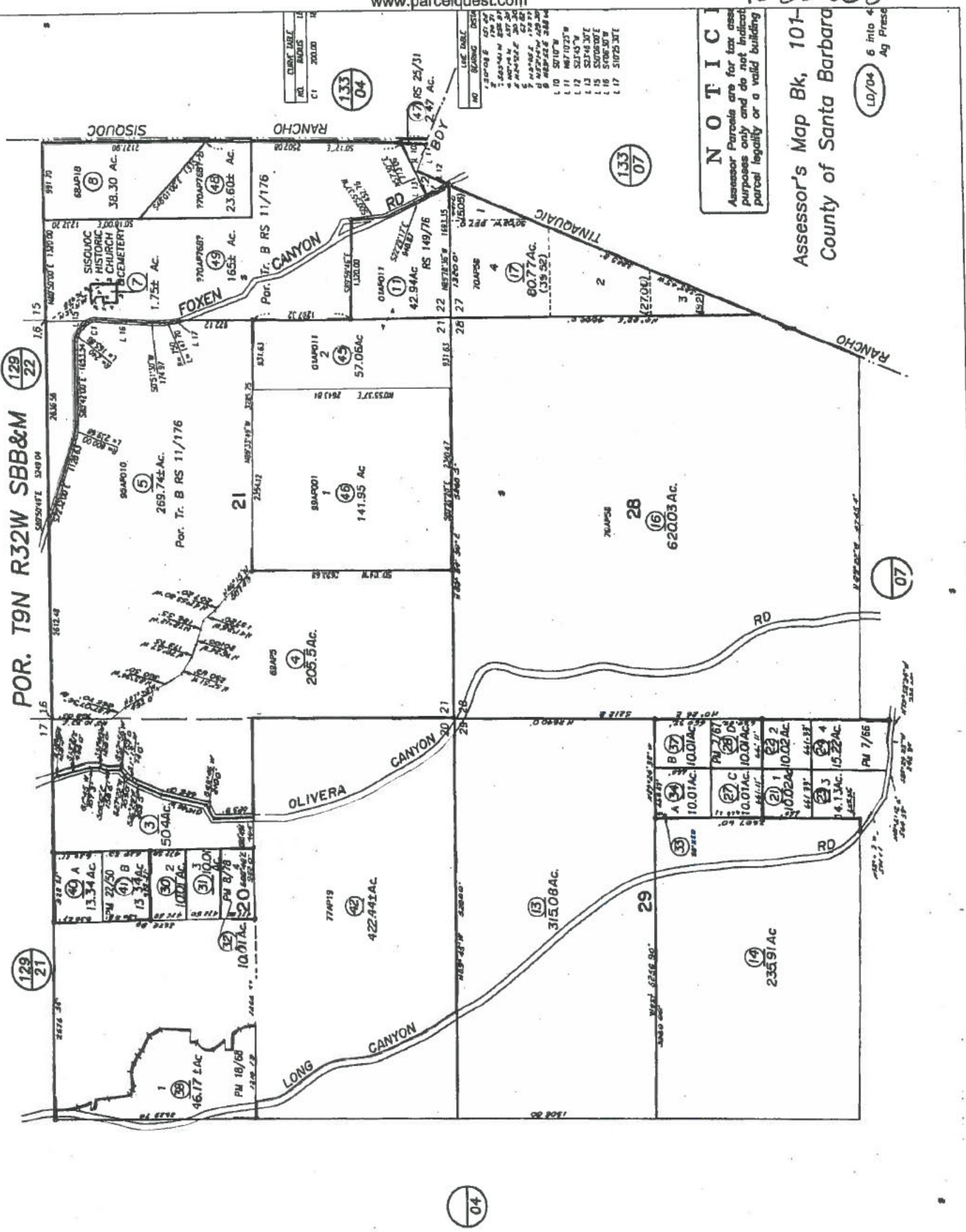
NAME Ron Taylor Drilling
(PERSON, FIRM, OR CORPORATION) (TYPED OR PRINTED)

2801 Mahoney Rd Santa Maria Calif 93455
ADDRESS CITY STATE ZIP

Signed Ron Taylor
C-57 LICENSED WATER WELL CONTRACTOR
DATE SIGNED 5-8-09
C-57 LICENSE NUMBER 523-858

DWR 188 REV. 06-03 IF ADDITIONAL SPACE IS NEEDED, USE NEXT CONSECUTIVELY NUMBERED FORM OSP 03 78836

1082558



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CC165 9N32W20D2

ORIGINAL
File with DWR 09N32W20

STATE OF CALIFORNIA
WELL COMPLETION REPORT
Refer to Instruction Pamphlet

No. 1082557

Page ___ of ___
Owner's Well No. 1
Date Work Began 12-12-08, Ended 2-10-09
Local Permit Agency ~~Santa Barbar~~
Permit No. ~~SR01-05813~~ Permit Date 1-17-08

DWR USE ONLY — DO NOT FILL IN
STATE WELL NO./STATION NO.
LATITUDE LONGITUDE
APN/TRS/OTHER

GEOLOGIC LOG

ORIENTATION (✓) X VERTICAL ___ HORIZONTAL ___ ANGLE ___ (SPECIFY)
DRILLING METHOD Rotary FLUID Mud

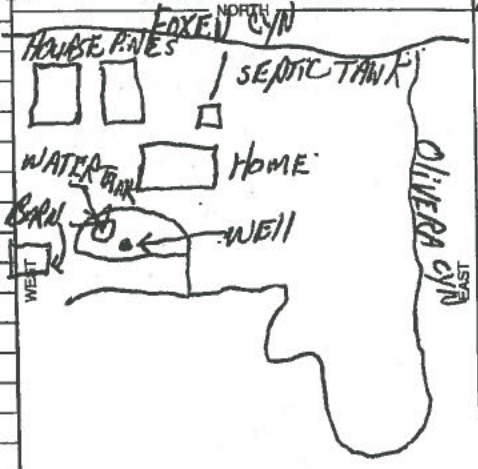
DEPTH FROM SURFACE Ft.	to Ft.	DESCRIPTION *Describe material, grain size, color, etc.*
0	15	Brown Clay
15	130	Small Gravel & Sand
130	147	Large Gravel & Sand
147	155	Brown Clay
155	200	Sand & Gravel
200	260	Coarse Sand
260	300	Sand & Gravel With Clay Strips
300	576	Coarse Sand & Gravel
576	620	Blue Sand Courase

TOTAL DEPTH OF BORING 620 (Feet)
TOTAL DEPTH OF COMPLETED WELL 600 (Feet)

CONFIDENTIAL
NOT FOR PUBLIC
WATER CODE SEC

WELL OWNER
34 50 42.80 120 16 1.54"
Address 5911 Olivera Cyn
City Santa Maria Calif 93455
County Santa Barbara
APN Book ___ Page ___ Parcel 101-050-041
Township ___ Range ___ Section ___
Lat ___ N DEG. MIN. SEC. Long ___ W DEG. MIN. SEC.

LOCATION SKETCH



Illustrate or Describe Distance of Well from Roads, Buildings, Fences, Rivers, etc. and attach a map. Use additional paper if necessary. PLEASE BE ACCURATE & COMPLETE.

ACTIVITY (✓)
X NEW WELL
MODIFICATION/REPAIR
___ Deepen
___ Other (Specify)
___ DESTROY *(Describe Procedures and Materials Under "GEOLOGIC LOG")*

USES (✓)
WATER SUPPLY
X Domestic ___ Public
___ Irrigation ___ Industrial
___ MONITORING
___ TEST WELL
___ CATHODIC PROTECTION
___ HEAT EXCHANGE
___ DIRECT PUSH
___ INJECTION
___ VAPOR EXTRACTION
___ SPARGING
___ REMEDIATION
___ OTHER (SPECIFY)

WATER LEVEL & YIELD OF COMPLETED WELL

DEPTH TO FIRST WATER ___ (Ft.) BELOW SURFACE
DEPTH OF STATIC WATER LEVEL 457 (Ft.) & DATE MEASURED 1-19-09
ESTIMATED YIELD * 21 (GPM) & TEST TYPE Pump
TEST LENGTH 24 (Hrs.) TOTAL DRAWDOWN 6 (Ft.)
** May not be representative of a well's long-term yield.*

CASING (S)

DEPTH FROM SURFACE Ft.	to Ft.	BORE-HOLE DIA. (Inches)	TYPE (✓) BLANK	SCREEN	CON-DUCTOR	FILL PIPE	MATERIAL / GRADE	INTERNAL DIAMETER (Inches)	GAUGE OR WALL THICKNESS	SLOT SIZE IF ANY (Inches)
0	460	11	X				PVC	5	SDR-21	
460	600	11		X			PVC	5	SDR-21	032

ANNULAR MATERIAL

DEPTH FROM SURFACE Ft.	to Ft.	TYPE CE-MENT (✓)	BEN-TONITE (✓)	FILL (✓)	FILTER PACK (TYPE/SIZE)
0	50	X			
					Montery

ATTACHMENTS (✓)

___ Geologic Log
___ Well Construction Diagram
___ Geophysical Log(s)
___ Soil/Water Chemical Analyses
___ Other ___

ATTACH ADDITIONAL INFORMATION, IF IT EXISTS.

CERTIFICATION STATEMENT

I, the undersigned, certify that this report is complete and accurate to the best of my knowledge and belief.

NAME Ron Taylor Drilling
(PERSON, FIRM, OR CORPORATION) (TYPED OR PRINTED)

ADDRESS 2801 Mahoney CITY Santa Maria STATE Calif ZIP 93455

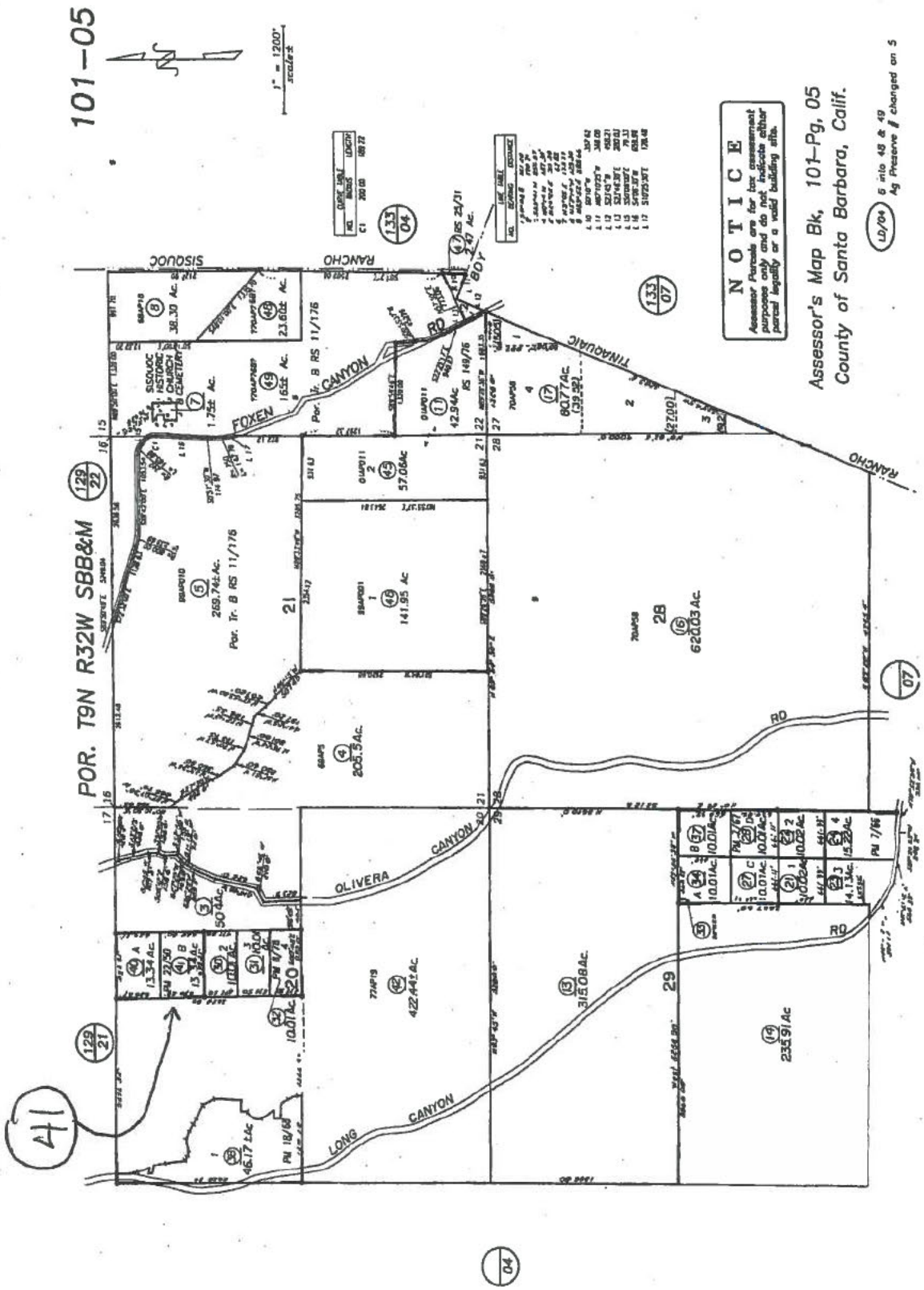
Signed [signature] C-57 LICENSED WATER WELL CONTRACTOR
DATE SIGNED 2-24-09
C-57 LICENSE NUMBER 523-858

DWR 188 REV. 05-03

IF ADDITIONAL SPACE IS NEEDED, USE NEXT CONSECUTIVELY NUMBERED FORM

OSP 03 78838

1082557



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9N 32W 20D1

CC166

TRIPLICATE
File Original, Duplicate and Triplicate with the
DIVISION OF WATER RESOURCES
P. O. BOX 1079
SACRAMENTO 5, CALIFORNIA

STATE OF CALIFORNIA
DEPARTMENT OF PUBLIC WORKS

DIVISION OF WATER RESOURCES

McCrosky " WS 10 20-9N-32W

WATER WELL DRILLERS REPORT

(Sections 7076, 7077, 7078, Water Code)

SHEET 1

Do Not Fill In
State Well No. 9N/32W-20D1
Other Well No.
Region

(1) **Driller:**
Name Charles A. Sloan
Address 324 Hall Street, Santa Maria
License No. Classification

Owner:
Name Douglas Oil Co.
Address Santa Maria, Calif.

(2) **Proposed use or uses** *(check)*:
Domestic ☐ Municipal ☐
Irrigation ☐ Industrial ☐
Domestic and Irrigation ☐ Test well ☐
Other

(3) **Equipment used** *(check)*:
Rotary ☐
Cable ☒
Dug well ☐
Other

(4) **Type of work** *(check)*:
New well ☒ Reconditioning of well ☐
Deepening existing well ☐

(5) **Well log:**
Total depth of well 455 ft.

Give details of formations penetrated, such as silt, peat, muck, sand, gravel, clay, shale, sandstone, hardpan, rock. Include size of gravel (diameter) and sand (fine, medium, coarse), color of material, structure (loose, packed, cemented, soft, hard, brittle).

Depth From Ground Surface	
0 ft. to 14 ft.	Adobe gravel & boulders
14 " " 42 "	Yellow old sand & gravel & some boulders
42 " " 46 "	Yellow clay & boulders
46 " " 100 "	Yellow old sand & gravel
100 " " 130 "	Gravel & blue shelled clay
130 " " 165 "	Medium sand, some clay
165 " " 175 "	Gravel & yellow clay
175 " " 200 "	Gravel & yellow clay
200 " " 230 "	Fine sand
230 " " 243 "	Fine sand & yellow clay
243 " " 255 "	Fine sand & clay
255 " " 265 "	Fine sand & clay shell
265 " " 285 "	Fine sand & blue clay
285 " " 315 "	Gravel & blue clay
315 " " 330 "	Fine sand & blue clay
330 " " 340 "	Gravel & blue clay
340 " " 350 "	Fine sand
350 " " 363 "	Medium sand & gravel
363 " " 395 "	Medium sand & gravel & some boulders
395 " " 398 "	Medium sand & gravel
398 " " 403 "	Medium sand & gravel & some boulders
403 " " 413 "	Medium sand & gravel
413 " " 434 "	Gravel & blue clay

Blue clay

DIVISION OF OIL & GAS
RECEIVED
JAN 1 2 1955
SANTA MARIA, CALIFORNIA

If additional space is required, continue on DWR Form No. 246—Supplement, and attach to respective report copies.

(6) **Casing left in well:**

LENGTH FT.	DIAMETER INCHES	SINGLE, DOUBLE, WELDED, OTHER	LBS. PER FOOT OR GAGE OF CASING	SEATING BELOW GROUND SURFACE, FT.

Type and size of shoe or well ring Welded joints ☒ Yes ☐ No

D.W.R. FORM NO. 246

23971 3-50 40M QUIN SPO

TRIPLICATE
File Original, Duplicate and Triplicate with the
DIVISION OF WATER RESOURCES
P. O. BOX 1079
SACRAMENTO 5, CALIFORNIA

STATE OF CALIFORNIA
DEPARTMENT OF PUBLIC WORKS

DIVISION OF WATER RESOURCES

SHEET 1

Do Not Fill In
State Well No. 9N/33W-20B
Other Well No.
Region

WATER WELL DRILLERS REPORT

(Sections 7076, 7077, 7078, Water Code)

(1) Driller:
Name
Address

License No. Classification

Owner:
Name Douglas Oil Co.
Address

(2) Proposed use or uses *(check)*:
Domestic ☐ Municipal ☐
Irrigation ☐ Industrial ☐
Domestic and Irrigation ☐ Test well ☐
Other

(3) Equipment used *(check)*:
Rotary ☐
Cable ☐
Dug well ☐
Other

(4) Type of work *(check)*:
New well ☐ Reconditioning of well ☐
Deepening existing well ☐

(5) Well log:
Total depth of well ft.

Depth From Ground Surface	Give details of formations penetrated, such as silt, peat, muck, sand, gravel, clay, shale, sandstone, hardpan, rock. Include size of gravel (diameter) and sand (fine, medium, coarse), color of material, structure (loose, packed, cemented, soft, hard, brittle).
421 ft. to 435 ft.	Blue clay & f. sand
435 " " 440 "	F. sand
440 " " 452 "	Hard f. sand
" " "	
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Fine clay

DIVISION OF OIL & GAS
RECEIVED
JAN 1 2 1953
SANTA MARIA, CALIFORNIA

If additional space is required, continue on DWR Form No. 246—Supplement, and attach to respective report copies.

(6) Casing left in well:

LENGTH FT.	DIAMETER INCHES	SINGLE, DOUBLE, WELDED, OTHER	LBS. PER FOOT OR GAGE OF CASING	SEATING BELOW GROUND SURFACE, FT.

Type and size of shoe or well ring Welded joints—☐ Yes ☐ No

D.W.R. FORM NO. 246

23971 3-50 40M QUIN SPO

Sect. 20

RESOURCES AGENCY OF CALIFORNIA
DEPARTMENT OF CONSERVATION
DIVISION OF OIL AND GAS
(805) 937-7246

REPORT OF WELL ABANDONMENT

J. A. Ruhl, Agent
Shell Western E&P Inc.
P. O. Box 11164
Bakersfield, CA 93389-1164

Santa Maria, California
~~July 29,~~ 1991

Your report of abandonment of well "McCroskey" 10 WS,
A.P.I. No. ----, Section 20, T. 9N, R. 32W, SB B.&M.,
Cat Canyon field, Santa Barbara County,
dated September 11, 1990, received September 14, 1990, has been examined in conjunction with records filed in this office, and we have determined that all of the requirements of this Division have been fulfilled.

Date of environmental inspection: July 24, 1991.

RAB:ks

cc: Conservation Committee
Update

M.G. MEFFERD, State Oil and Gas Supervisor

By William E. Branson
Deputy Supervisor

06159

DIVISION OF OIL AND GAS
CHECK LIST - RECORDS RECEIVED AND WELL STATUS

COMPANY SWEPI WELL NO. "MCCROSKEY" 10

API NO. ------- Sec. 20, T. 9N, R. 32W, SB B.&M.

COUNTY SANTA BARBARA FIELD CAT CANYON

RECORDS RECEIVED	DATE
Well Summary (Form OG100)	
History (Form OG103)	9-14-90
Directional Survey	
Core Record and/or SWS	
Other:	
Electric logs:	

STATUS

abandoned water source 9/6/91
(Date)

Engineer's Check List

- ✓ Summary, History, & Core Record
- ___ Directional Survey
- ___ Logs
- ✓ Operator's Name
- ✓ Signature
- ✓ Well Designation
- ✓ Location
- ✓ Notices
- ___ "T" Reports WAIVED
- ___ Casing Record
- ___ Plugs
- ✓ Env. Insp. Date 7-24-91
- ___ Production/Injection
- ___ E Well on Prod., enter EDP
- ___ Computer
- ___ Map Work: NOT ON MAP
- ___ Follow Up:
- ___ ~~Hold for:~~

Clerical Check List

- Form OGD121 7-29-91
- ___ Location change (OGD165)
- ___ Elevation change (OGD165)
- ✓ Final Letter (OG159) 7-26-91
- ___ Release of Bond (OGD150)
- ___ Abd ___ in EDP
- ___ Notice of Records Due(OGD170)
- ___ Request:

Records Approved 9/14/90 RB

OGD2

D I V I S I O N O F O I L A N D G A

History of Oil or Gas Well

SHELL WESTERN E & P INC. WEST COAST DIVISION

WELL: MCCROSKEY 10 API #: ?

FIELD: CENTRAL COAST /CAT CANYON LEASE: MCCROSKEY

COUNTY: SANTA BARBARA STATE: CA

SEC: 20 TOWNSHIP: 09N RANGE: 32W B & M: SAN BERNARDINO

NAME: G. R. CULP TITLE: OPERATIONS TECH

SIGNATURE: 9/11/90

J. A. RUHL, AGENT

DESCRIPTION OF WORK - PLUG AND ABANDONMENT

09/06/90

MIRU. POH W/ROD AND PUMP. UNLAND TBG. POH. MADE UP POLISH ROD ON SANDLINE. RIH. TAG @ 420'. POH. MADE UP 2 3/8" TBG. RIH TO 420'. MIX AND PUMP 112 CU FT CLASS "G" CMT W/ 1/2 LB PER SXS FLOW SEAL & 2% CC -0- DISPLACE CMT TO SURFACE. POH. TOP WELL OFF. NOTE: CALLED DOG, ROSS, APPROVED PLACEMENT OF CMT F/420' TO SURFACE. RIG DOWN EQUIPMENT. NOTE: 12 CU FT CLASS "G" FOR TOP JOB.

DIVISION OF OIL AND GAS
RECEIVED
SEP 14 1990
SANTA MARIA, CA.

7/24/91 final sfc restoration ok

RECEIVED
SEP 7 1990

MAP NO.	MAP LETTER	BOND NO.	114	121
				9-14-90 KL

RESOURCES AGENCY OF CALIFORNIA
DEPARTMENT OF CONSERVATION
DIVISION OF OIL AND GAS

No. P 390-186
Field Code ____
Area Code ____
New Pool Code ____
Old Pool Code ____

PERMIT TO CONDUCT WELL OPERATIONS

D. L. Oreolt, Agent
Shell Western E&P Inc.
P. O. Box 11164
Bakersfield, CA 93389-1164

Santa Maria, California
June 6, 1990

Your ____ proposal to abandon well "McCroskey" 10, A.P.I. No. ------, Section 20, T. 9N, R. 32W, SB B.&M., Cat Canyon field, ____ area, ____ pool, Santa Barbara County, dated 5-29-90, received 6-4-90, has been examined in conjunction with records filed in this office.

THE PROPOSAL IS APPROVED PROVIDED THAT:

1. THIS DIVISION IS NOTIFIED:

   a. To witness the placing of the cement plug from total depth to the surface.
   b. To inspect and approve the cleanup of the well site before approval of abandonment will be issued.

BLANKET BOND
AJK:ks

Engineer Al Koller

Phone (805) 937-7246

M.G. MEFFERD, State Oil and Gas Supervisor

By [signature]
Deputy Supervisor

A copy of this permit and the proposal must be posted at the well site prior to commencing operations. Records for work done under this permit are due within 60 days after the work has been completed or the operations have been suspended.
OG111

STATE OF CALIFORNIA
DEPARTMENT OF CONSERVATION

DIVISION OF OIL AND GAS

Notice of Intention to Abandon Well

FOR DIVISION USE ONLY			
CARDS	BOND	FORMS	
		OG0114	OG0121
—	Blanket	—	6-5-90 mfu

DIVISION OF OIL AND GAS

In compliance with Section 3229, Division 3, Public Resources Code, notice is hereby given that it is our intention to abandon well ~~OLIVERA CANYON,~~ MC CROSKEY 10, API No. N/A,

Sec. 20, T. 9N, R. 32W, SB B. & M., CAT CANYON Field, SANTA BARBARA County.

commencing work on MAY 8TH, 19 90

The present condition of the well is:

1. Total depth: UNKNOWN (NO RECORDS ON FILE)
2. Complete casing record, including plugs and perforations (present hole)
3. Last produced _____ (Date) (Oil, B/D) (Gas, Mcf/D) (Water, B/D)

or

4. Last injected _____ (Date) (Water, B/D) (Gas, Mcf/D) (Surface pressure)

Additional data for dry hole (show depths):

5. Oil or gas shows
6. Stratigraphic markers
7. Formation and age at total depth
8. Base of fresh water sands _____

9. Is this a critical well according to the definition on the reverse side of this form? ☐ Yes ☒ No

The proposed work is as follows:

PERMANENTLY ABANDON.

DIVISION OF OIL AND GAS
RECEIVED
JUN 0 4 1990
SANTA MARIA, CA

It is understood that if changes in this plan become necessary, we are to notify you immediately.

Address P. O. BOX 11164 (Street)
BAKERSFIELD, (City) CA (State) 93389-1164 (Zip)
Telephone Number (805) (Area Code) 326-5328 (Number)

SHELL WESTERN E&P INC. (Name of Operator)
By D. L. OREOLT (Print Name)
D L Oreolt (Signature) 5/29/90 (Date)

OG108 (10/85/DWAR/5M)

OLIVERA CANYON, MC CROSKEY 10
PERMANENT ABANDONMENT

STATUS: Shut-in fresh water well

TD: Unknown (No records on file.)

CASING: Size Unknown (No records on file.)

NOTES: Well history shows pump being changed 5/78.
Rods: 9 - 7/8" Pump: 3" TLE WSV

PROGRAM: PERMANENTLY ABANDON

1. M.I.R.U. Bleed well down **(This lease is known for its LETHAL concentrations of H2S. Initiate all H2S precautions necessary to SAFELY conduct abandonment operations)**, kill if necessary. Install and test BOPE.

2. P.O.O.H. W/ rods and pump.

3. P.O.H. W/ tubing.

4. R.I.H. W/ tubing and clean out as deep as possible. (T.D. is unknown.) If T.D. depth is less than 1300', proceed to step 5. If T.D. depth is deeper than 1300', contact Production Engineering for cavety shot depth.

5. R.I.H. w/ tubing 2' above T.D. and pump balanced plugs API Class "G" 2% CaCl to surface. D.O.G. to witness surface plug.

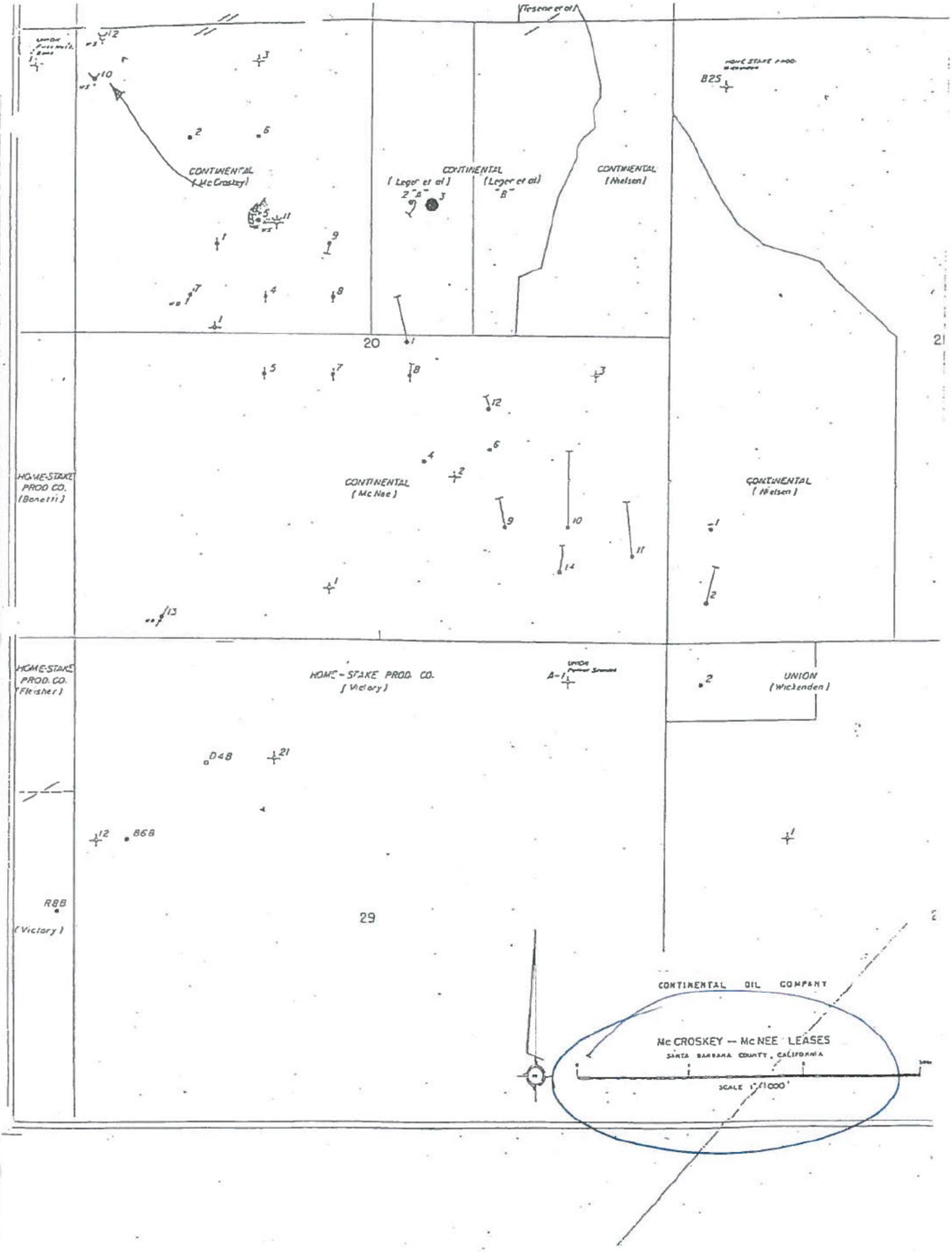
6. Cut off wellhead 6' below surface and weld on steel plate with well name and abandonment date.

7. Restore surface location to its original pristine beauty. D.O.G. to inspect site when complete.

RECOMMENDED: ---------- APPROVED BY: ----------

DKC 5/22/90 RTK 5/22/90

RMP 5/22/90


CONTINENTAL (McCroskey)
CONTINENTAL (Leger et al) 2 "A" 3
CONTINENTAL (Leger et al) "B"
CONTINENTAL (Nielsen)
HOME STAKE PROD. B25
20
21
HOME-STAKE PROD. CO. (Bonetti)
CONTINENTAL (McNee)
CONTINENTAL (Nielsen)
HOME-STAKE PROD. CO. (Fleisher)
HOME-STAKE PROD. CO. (Victory)
UNION (Wickenden)
D48
868
R88 (Victory)
29
CONTINENTAL OIL COMPANY
McCROSKEY — McNEE LEASES
SANTA BARBARA COUNTY, CALIFORNIA
SCALE 1" = 1000'

34.84959 -120.276349 CC167

9N32W 2002

STATE OF CALIFORNIA, RESOURCES AGENCY ARNOLD SCHWARZENEGGER, GOVERNOR

DEPARTMENT OF CONSERVATION

DIVISION OF OIL, GAS AND GEOTHERMAL RESOURCES

5075 S. Bradley Rd. • Suite 221 • SANTA MARIA, CALIFORNIA 93455

PHONE 805 / 937-7246 • FAX 805 / 937-0673 • WEBSITE conservation.ca.gov

October 31, 2007

Mark Du Frene, Agent
Aera Energy LLC
66893 Sargent Canyon Road
San Ardo, CA 93450

Subject: "McCroskey" WS12, API 083-20747, Cat Canyon Field

Dear Mr. DuFrene:

"McCroskey" WS12 was drilled by Conoco as a water-source well with a permit issued by the Division. It was included in the transfers from Conoco to Shell, and from Shell to Aera. Therefore, it remains Aera's responsibility. Please ensure that monthly reports are submitted to the Division's data management unit as required.

Sincerely,

William E Brannon

William E. Brannon
Deputy Supervisor

RB:cb

cc: Judith Carnes
Well file

8

Dazo, Pat

From: Carnes, Judith
Sent: Tuesday, October 30, 2007 9:12 AM
To: Dazo, Pat
Subject: Aera 083-20747

Hi Pat –

Would you please check on this well for me. It keeps showing up on the Missing Monthly Reports list and Aera sends the 110 back to us saying this well is not Aera's well. According to WellStat it is an Aera well. The well is Water Storage and according to wellstat it was transferred from Conoco (C7800) 2/14/07 or 8/1/97. History Comment well transfered from C7800 to A0610 rbrunett

They reported "01" 1/07-4/07 and have not reported since.

Judi Carnes
Control Unit Supervisor

McCroskey WS12
20-9N-32W
Cat Canyon
Aera

Letter to Aera sent to CB

7

FORM 121

INDEX OF WELL RECORDS

RESOURCES AGENCY OF CALIFORNIA
DEPARTMENT OF CONSERVATION
DIVISION OF OIL AND GAS

AF[illegible]A ENERGY LLC

Operator ~~CC~~
Field Cat Canyon County Santa Barbara
Sec. 20, T. 9N, R. 32W, S.B. B. & M.

Well Designation	Well No.	A.P.I. No. 083	Notices (Date Rec'd)	Records: Elec. Log	Records: Hist.	Records: Re-work	Records: Aban.	Status	Remarks
"McCROSKEY"	WS11	20746	4-14-75		6.1.76				[illegible]
			4-15-75 aband.						Final. ltr. 6-3-76
"McCROSKEY"	WS12	20747	4-15-75		6.1.76				[illegible]
			acq. from Conoco Inc.					10-22-85	
"McCROSKEY"	10	--	No Records						
			6-4-90 Abandon		9.90				Final Letter 7-29-91

[illegible]

6

DIVISION OF OIL AND GAS

CHECK LIST - RECORDS RECEIVED AND WELL STATUS

Company Continental Oil Co. Well No. "McCroskey" WS12

API No. 083-20747) Sec. 20, T. 9N, R. 32W, S.B. B.&M.

County Santa Barbara Field Cat Canyon

RECORDS RECEIVED	DATE
Well Summary (Form OG100)	
History (Form OG103)	6-1-76
Core Record (Form OG101)	
Directional Survey	
Sidewall Samples	
Other	
Date final records received	
Electric logs:	

STATUS		STATUS	
Producing - Oil		Water Disposal	
Idle - Oil		Water Flood	
Abandoned - Oil		Steam Flood	
Drilling - Idle		Fire Flood	
Abandoned - Dry Hole		Air Injection	
Producing - Gas		Gas Injection	
Idle - Gas		CO_2 Injection	
Abandoned - Gas		LPG Injection	
Gas-Open to Oil Zone		Observation	
Water Flood Source	✓		

DATE

RECOMPLETED

REMARKS

ENGINEER'S CHECK LIST

1. Summary, History, & Core record (dupl.) ✓
2. Electric Log ✓
3. Operator's Name ✓
4. Signature ✓
5. Well Designation ✓
6. Location ✓
7. Elevation ✓
8. Notices ✓
9. "T" Reports ✓
10. Casing Record ✓
11. Plugs
12. Surface Inspection
13. Production
14. E Well on Prod. Dir. Sur.

CLERICAL CHECK LIST

1. Location change (F-OGD165)
2. Elevation change (F-OGD165)
3. Form OGD121
4. Form OG159 (Final Letter)
5. Form OGD150b (Release of Bond)
6. Duplicate logs to archives
7. Notice of Records due (F-OGD170)

Water well records for "McCroskey" WS10 are in water wells file (water well reports)

RECORDS NOT APPROVED

Reason:

RECORDS APPROVED 6/2/76 ATB.

RELEASE BOND

Date Eligible

(Use date last needed records were received.)

MAP AND MAP BOOK n/c ATB

5

OGD2 (2-75-GSR1-4M)

LONG BEACH OFFICE - USE REVERSE SIDE

SUBMIT IN DUPLICATE

20796-705 1-74 8M ② OSP

RESOURCES AGENCY OF CALIFORNIA
DEPARTMENT OF CONSERVATION

DIVISION OF OIL AND GAS

History of Oil or Gas Well

OPERATOR CONTINENTAL OIL COMPANY FIELD Olivera Canyon

Well No. "McCroskey" WS 12, Sec. 20, T. 9N, R. 32W, S.B.B. & M.

Date May 25, 19 76 Signed E L Manering

290 Maple Court, Suite 128 (805)642-8154 Title Division Manager of Production
(Address) (Telephone Number) (President, Secretary or Agent)
Ventura, California 93003

History must be complete in all detail. Use this form to report all operations during drilling and testing of the well or during redrilling or altering the casing, plugging, or abandonment with the dates thereof. Include such items as hole size, formation test details, amounts of cement used, top and bottom of plugs, perforation details, sidetracked junk, bailing tests and initial production data.

Date

Objective: To drill water source well

T.D.: 700'

Casing: 11-3/4", 60#, Natl "D" 0-700'

Work Done: August 1975 M.I.R.U. Drilled to 700' and ran 11-3/4", 60# Natl. "D" casing 0-700'. Installed rods, pump and tubing and put well on production.

D.O.G. Santa Maria (2)
D.O.P. Santa Maira (1)
Well File (1)
Explo. (1)

Map No.	Map Letter	Bond No.	Zone		121
					6-1-76 DB

4

OG 103

RESOURCES AGENCY OF CALIFORNIA
DEPARTMENT OF CONSERVATION

DIVISION OF OIL AND GAS

REPORT ON PROPOSED OPERATIONS No. P 375-162

Mr. H.D. Haley, Agent
Continental Oil Company
180 N. Ashwood Avenue
Ventura, CA 93003

Santa Maria, Calif.
April 17, 1975

DEAR SIR:

Your proposal to drill Well No. (083-20747) "McCreskey" WS12, Section 20, T. 9N., R. 32W., S.B.B. & M., Cat Canyon Field, Santa Barbara County, dated undated, received 4-15-75, has been examined in conjunction with records filed in this office.

DECISION: THE PROPOSAL IS APPROVED.

Blanket Bond

JLZ:kc

3

THOMAS E. GAY, JR., Acting Chief
State Oil and Gas Supervisor

By [signature], Deputy

25476-706 7-74 50M ①D OBP
OG 111

083-20747

RESOURCES AGENCY OF CALIFORNIA
DEPARTMENT OF CONSERVATION

DIVISION OF OIL AND GAS
Notice of Intention to Drill New Well

4

DIVISION OF OIL AND GAS RECEIVED
APR 15 1975
Santa Maria, California

This notice and indemnity or cash bond shall be filed, and approval given, before drilling begins. If operations have not commenced within one year of receipt of the notice, this notice will be considered cancelled.

FOR DIVISION USE ONLY					
MAP	MAP BOOK	CARDS	BOND	FORMS 114	FORMS 121
		✓	Blanket		4-16-75

DIVISION OF OIL AND GAS

In compliance with Section 3203, Division 3, Public Resources Code, notice is hereby given that it is our intention to commence drilling well No. "McCroskey" ~~Water Source~~ WS 12, API No. (083-20747) (Assigned by Division),

Sec. 20, T. 9N, R. 32W, S.B. B. & M., Olivera Canyon Field, Santa Barbara County.

Legal description of mineral-right lease, consisting of 240 acres, is as follows: (Attach map or plat to scale)

Producing lease

Do mineral and surface leases coincide? Yes X No ____ If answer is no, attach legal description of both surface and mineral leases, and map or plat to scale.

Location of well 76 feet South (Direction) along ~~xxxxxxx~~ section line and 211 feet East (Direction) at right angles to said line from the Northwest corner of ~~xxxxxx~~ section 20 or

If well is to be directionally drilled, show proposed coordinates at total depth ____

Elevation of ground above sea level 607 feet.

All depth measurements taken from top of KB (Derrick Floor, Rotary Table or Kelly Bushing) which is 10 feet above ground.

PROPOSED CASING PROGRAM

SIZE OF CASING INCHES A.P.I.	WEIGHT	GRADE AND TYPE	TOP	BOTTOM	CEMENTING DEPTHS	CALCULATED FILL BEHIND CASING
11 3/4"	60#	National "D"	0	700'	----------	----------

(A complete drilling program is preferred and may be submitted in lieu of the above program)

Intended zone(s) of completion Paso Robles Gravels (200-700') (Name, depth and expected pressure) Estimated total depth 700'

It is understood that if changes in this plan become necessary we are to notify you immediately.

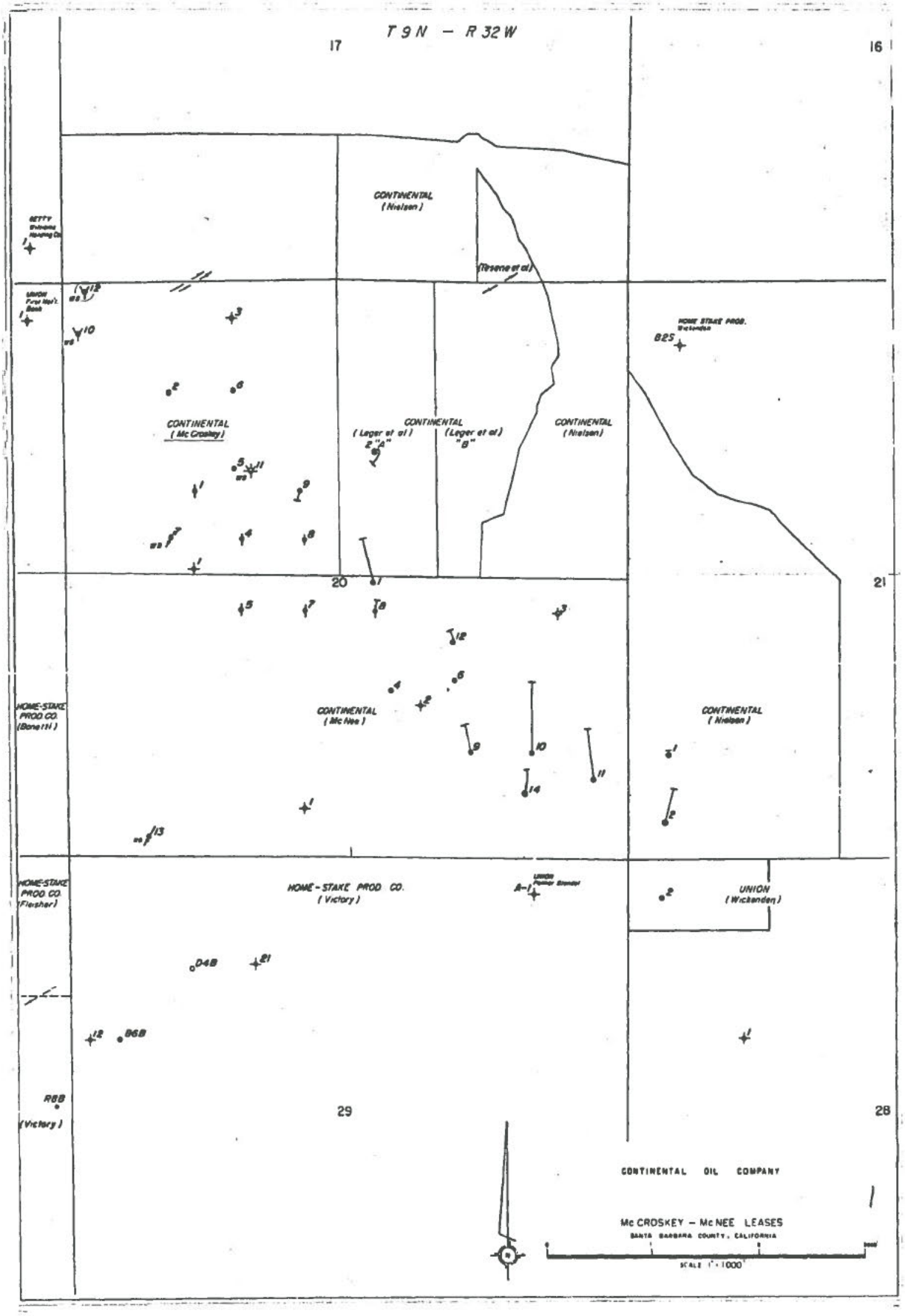
Address 180 N. Ashwood Ave. (Street)
Vta (City) Ca (State) 93003 (Zip)
Telephone Number 642-8154

CONTINENTAL OIL COMPANY (Name of Operator)
By [signature] (Date)
Division (Name) Manager of Prod.
Type of Organization Corporation (Corporation, Partnership, Individual, etc.)

DOG-S.M. ● EXPL(1) W.F.(1)

2

OG105 (12-73-GSR1-15M)


T 9 N — R 32 W
17
16
20
21
29
28
CONTINENTAL (Nielsen)
(Tesene et al)
CONTINENTAL (Mc Croskey)
CONTINENTAL (Leger et al) 2 "A"
CONTINENTAL (Leger et al) "B"
CONTINENTAL (Nielsen)
HOME STAKE PROD. Wickenden
B2S
HOME-STAKE PROD CO. (Bonetti)
CONTINENTAL (Mc Nee)
CONTINENTAL (Nielsen)
HOME-STAKE PROD CO. (Fleisher)
HOME-STAKE PROD CO. (Victory)
UNION (Wickenden)
D4B
B6B
R8B
(Victory)
CONTINENTAL OIL COMPANY
Mc CROSKEY — Mc NEE LEASES
SANTA BARBARA COUNTY, CALIFORNIA
SCALE 1" = 1000'

CC168 9N32W20E

09N32W20

ORIGINAL
File with DWR
Page 1 of 1
Owner's Well No. 2
Date Work Began 7/18/06, Ended 7/21/06
Local Permit Agency Santa Barbara County EHS
Permit No. 0104489 Permit Date 7/2/06

STATE OF CALIFORNIA
WELL COMPLETION REPORT
No. e055237

DWR USE ONLY — DO NOT FILL IN
STATE WELL NO./STATION NO.
LATITUDE LONGITUDE
APN/TRS/OTHER

GEOLOGIC LOG

ORIENTATION (✓) X VERTICAL ___ HORIZONTAL ___ ANGLE ___ (SPECIFY)

DRILLING METHOD mud rotary FLUID bent

DEPTH FROM SURFACE Ft.	to Ft.	DESCRIPTION Describe material, grain size, color, etc.
0	12	soil
12	70	gravel sand clay
70	75	clay sand gravel
75	79	clay sand gravel
79	120	clay gravel sand
120	271	gravel sand some clay
271	273	hard blue clay
273	315	blue gravel sand
315	367	brn sand and gravel some clay
367	397	blue sand gravel clay
397	400	hard rock

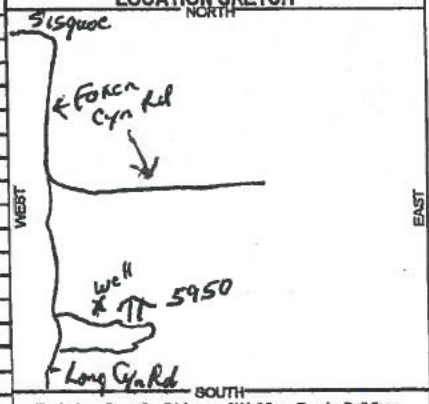
TOTAL DEPTH OF BORING 400 (Feet)
TOTAL DEPTH OF COMPLETED WELL 400 (Feet)

WELL OWNER

WELL LOCATION

Address same
City
County santa barbara
APN Book 101 Page 050 Parcel 038
Township Range Section
Latitude 34 | 50 | 601 NORTH (DEG. MIN. SEC.) Longitude 120 | 16 | 579 WEST (DEG. MIN. SEC.)

LOCATION SKETCH



Illustrate or Describe Distance of Well from Roads, Buildings, Fences, Rivers, etc. and attach a map. Use additional paper if necessary. PLEASE BE ACCURATE & COMPLETE.

ACTIVITY (✓)

X NEW WELL
MODIFICATION/REPAIR
___ Deepen
___ Other (Specify)
___ DESTROY (Describe Procedures and Materials Under "GEOLOGIC LOG")

USES (✓)

WATER SUPPLY
X DOMESTIC ___ PUBLIC
X IRRIGATION ___ INDUSTRIAL
MONITORING ___
TEST WELL ___
CATHODIC PROTECTION ___
HEAT EXCHANGE ___
DIRECT PUSH ___
INJECTION ___
VAPOR EXTRACTION ___
SPARGING ___
REMEDIATION ___
OTHER (SPECIFY) ___

WATER LEVEL & YIELD OF COMPLETED WELL

DEPTH TO FIRST WATER ___ (Ft.) BELOW SURFACE
DEPTH OF STATIC WATER LEVEL 261 (Ft.) & DATE MEASURED
ESTIMATED YIELD * ___ (GPM) & TEST TYPE
TEST LENGTH ___ (Hrs.) TOTAL DRAWDOWN ___ (Ft.)
* May not be representative of a well's long-term yield.

CASING (S)

DEPTH FROM SURFACE Ft.	to Ft.	BORE-HOLE DIA. (Inches)	TYPE (✓) BLANK	SCREEN	CON-DUCTOR	FILL PIPE	MATERIAL / GRADE	INTERNAL DIAMETER (Inches)	GUAGE OR WALL THICKNESS	SLOT SIZE IF ANY (Inches)
0	300	11	x				pvc	6	cl200	
300	400	11		x			pvc	6	cl200	.032

ANNULAR MATERIAL

DEPTH FROM SURFACE Ft.	to Ft.	TYPE CE-MENT (✓)	BEN-TONITE (✓)	FILL (✓)	FILTER PACK (TYPE/SIZE)
0	39	x			
39	400			x	3/8 pea

ATTACHMENTS (✓)

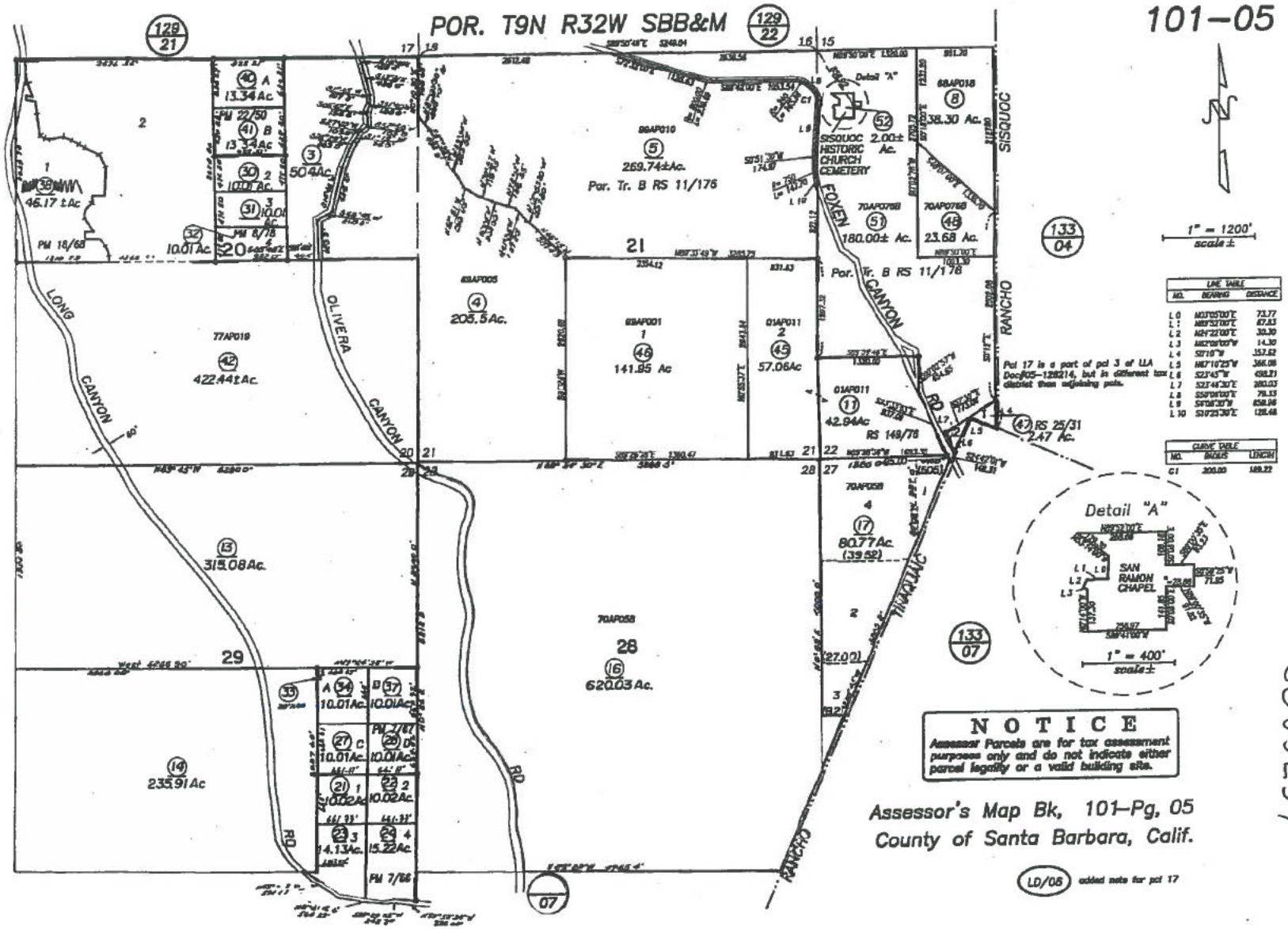
___ Geologic Log
___ Well Construction Diagram
___ Geophysical Log(s)
___ Soil/Water Chemical Analysis
___ Other
ATTACH ADDITIONAL INFORMATION, IF IT EXISTS.

CERTIFICATION STATEMENT

I, the undersigned, certify that this report is complete and accurate to the best of my knowledge and belief.

NAME Santa Ynez Pump & Drilling (PERSON, FIRM, OR CORPORATION)
P.O.Box 593 Los Olivos, Ca. 93441 (ADDRESS)
Signed Michael Hernandez (C-57 LICENSED WATER WELL CONTRACTOR) 9/28/06 (DATE SIGNED) 753623 (C-57 LICENSE NUMBER)

IF ADDITIONAL SPACE IS NEEDED, USE ADDITIONAL FORMS AND CONSECUTIVELY NUMBER ALL



POR. T9N R32W SBB&M
101-05
129/21
129/22
133/04
133/07
04
07
LONG CANYON
OLIVERA CANYON
FOXEN CANYON
RANCHO SISQUOC
RANCHO TINAQUAIC
RD
SISQUOC HISTORIC CHURCH CEMETERY
Detail "A"
SAN RAMON CHAPEL
1" = 1200' scale ±
1" = 400' scale ±
Pcl 17 is a part of pcl 3 of LLA Doc#05-126214, but in different tax district than adjoining pcls.
LINE TABLE
CURVE TABLE
NOTICE
Assessor Parcels are for tax assessment purposes only and do not indicate either parcel legality or a valid building site.
Assessor's Map Bk, 101-Pg, 05
County of Santa Barbara, Calif.
LD/06 added note for pcl 17

e055237

QUADRUPLICATE
Use to comply with local requirements

9N 32W 20G

101-050-032

CC170

STATE OF CALIFORNIA
THE RESOURCES AGENCY
DEPARTMENT OF WATER RESOURCES

WATER WELL DRILLERS REPORT

Do not fill in

No. 05231

Notice of Intent No. _____
Permit No. or Date 1971

State Well No. _____
Other Well No. _____

(1) OWNER: Name Oscar Ferrari
Address P.O. Box 353
City Guadalupe, CA Zip 93434

(2) LOCATION OF WELL (See instructions):
County Santa Barbara Owner's Well Number 1
Well address if different from above
Township 9N Range 32W Section
Distance from cities, roads, railroads, fences, etc. Rancho Sisquoc on south rim of Olivera Cyn. .7 miles south of Foxen Cyn Rd

34 50' 36.49"
120 15' 59.99"

WELL LOCATION SKETCH

(3) TYPE OF WORK:
New Well XX Deepening ☐
Reconstruction ☐
Reconditioning ☐
Horizontal Well ☐
Destruction ☐ (Describe destruction materials and procedures in Item 12)

(4) PROPOSED USE:
Domestic XX
Irrigation XX
Industrial ☐
Test Well ☐
Stock ☐
Municipal ☐
Other ☐

(5) EQUIPMENT:
Rotary XX Reverse ☐
Cable ☐ Air ☐
Other ☐ Bucket ☐

(6) GRAVEL PACK:
Yes X No ☐ Size 1/4" X 1/8"
Diameter of bore 15"
Packed from 50' to 514' ft.

(7) CASING INSTALLED:
Steel XX 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	514	8 5/8	.250	0	322	.060

(9) WELL SEAL:
Was surface sanitary seal provided? Yes XX No ☐ If yes, to depth 50' ft.
Were strata sealed against pollution? Yes ☐ No ☐ Interval _____ ft.
Method of sealing Top 50' cemented

(10) WATER LEVELS:
Depth of first water, if known _____ ft.
Standing level after well completion _____ ft.

(11) WELL TESTS:
Was well test made? Yes ☐ No ☐ If yes, by whom? _____
Type of test Pump ☐ Bailer ☐ 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

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

SEE ATTACHED SHEETS

OCT 16 1978

Work started 8-31 1978 Completed 9-22 1978

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

SIGNED _____ (Well Driller)

NAME Floyd V. Wells, Inc. (Person, firm or corporation) (Typed or printed)
Address 1337 W. Betteravia Rd
City Santa Maria, CA Zip 93454
License No. #C57-229570 Date of this report 9-13-78

DO NOT DETACH
NOT FOR PUBLIC USE
WATER CODE SEC. 13752

DWR 188 (REV. 7-76) IF ADDITIONAL SPACE IS NEEDED, USE NEXT CONSECUTIVELY NUMBERED FORM

SANTA MARIA, CALIFORNIA

FLOYD V. WELLS, INC.

GOLETA, CALIFORNIA

WATER WELL DRILLING LOG

Permit # 1971

Owner: Oscar L. Ferrari Company:

Well No.: 1 Rig: 5

Location of Well: T9N R32W Rancho Sisquoc on south rim of Olivera Cyn. .7 miles south of Foxen Cyn Rd

Surface Pipe or Seal: Top 50' cemented Size: Depth: 50' Gauge:

Well Bore Diameter: 15" Depth of Casing Set: 514'

Casing Size: 8 5/8" Gauge: .250 Type: Steel

Perforations: Size: .060 Type: Vertical slot Number: 16 rows

Perforation Location from Ground Level: 322 From: 0' To: 322' blank

322' 514' perf

el Pack: Type: Dumped Size: 1/4" X 1/8" Quantity: 26.49 tons

Bits: No. Used: 3 Size: 2-9 7/8" 1-15"

Drilling Method: Air: Foam: Mud: XX

Material Used: Gel: 65 sacks P-95: Foam:

Well Started: 8-31-78 Well Completed: 9-22-78 Driller: Frank

TEST PUMPING INFORMATION:

Production Test:

Standing Water Level: Pumping Level:

G.P.M.: Pumping Level

REMARKS:

Ken Vertrees, Printers, Lithographers - Santa Maria, CA

SANTA MARIA, CALIFORNIA

FLOYD V. WELLS, INC.

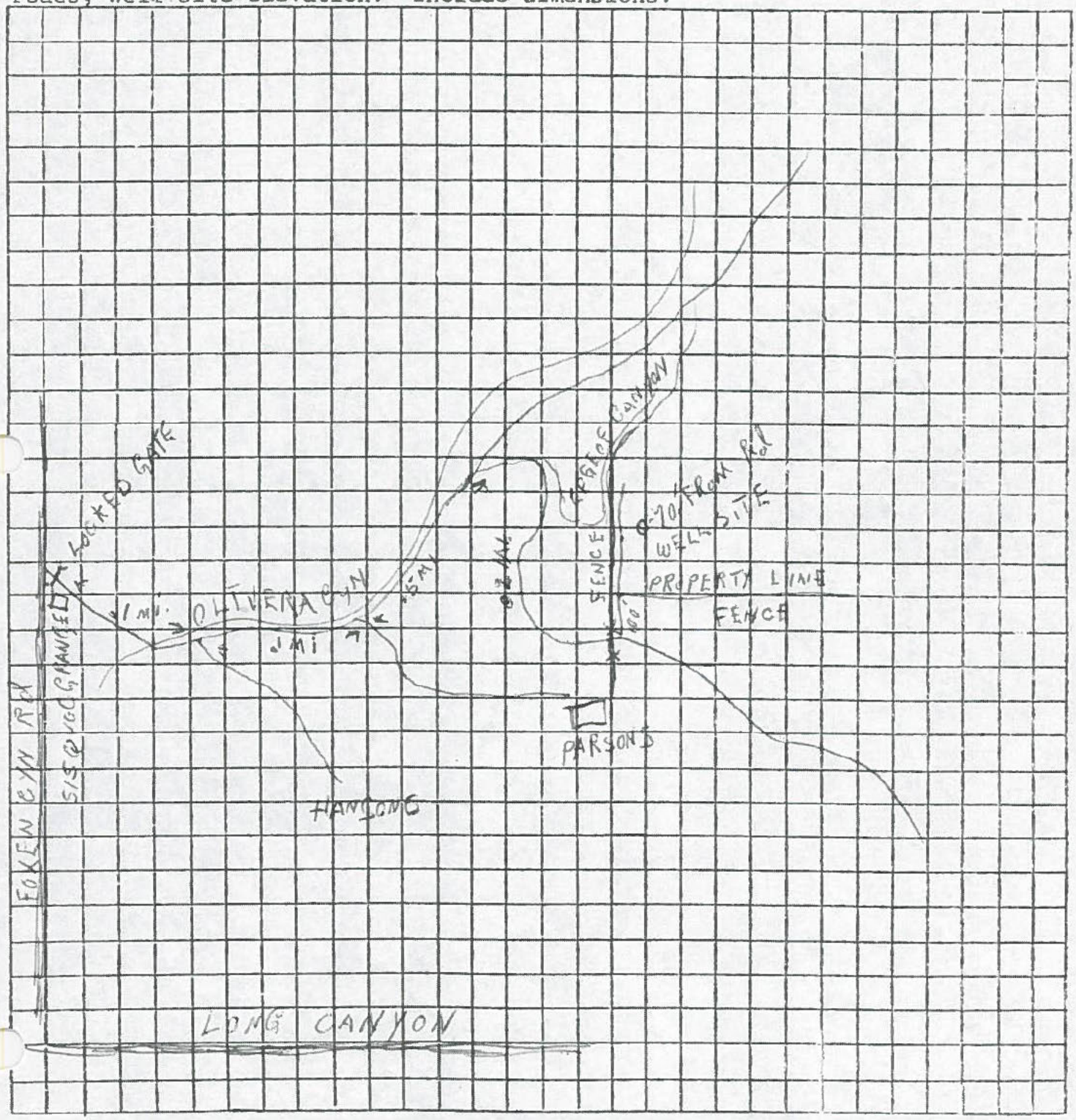
GOLETA, CALIFORNIA

FORMATION LOG

FROM	TO	DESCRIPTION
0	20	Fine sand and gravel boulders
20	40	Sand and gravel
40	50	Tan clay
50	90	Fine sand and gravel
90	142	Course sand and gravel
142	189	Clay w/sand strips
189	270	Course sand and gravel
270	301	Course sand
301	310	Sandy clay
310	450	Course sand and gravel
450	510	Blue sandstone and gravel
510	514	Blue shale

WELL PERMIT APPLICATION
Plot Plan
Scale: 1/4" = 20'

Indicate below the exact location of the well with respect to the following items within 200' of the well: Property lines, sewers and private sewage systems, water bodies on watercourses, drainage pattern, existing wells, access roads, well site elevation. Include dimensions.



9N32W20H — Olivera Langr domestic well ? — CC1 11 — 20H.

TRIPLICATE
File Original, Duplicate and Triplicate with the
DIVISION OF WATER RESOURCES
P. O. BOX 1079
SACRAMENTO 5, CALIFORNIA

STATE OF CALIFORNIA
DEPARTMENT OF PUBLIC WORKS
DIVISION OF WATER RESOURCES

SHEET 1

Do Not Fill In
State Well No. [illegible]
Other Well No.
Region

WATER WELL DRILLERS REPORT

(Sections 7076, 7077, 7078, Water Code)

(1) Driller:
Name [illegible]
Address [illegible]
[illegible]
License No. Classification

Owner:
Name [illegible]
Address [illegible]
[illegible]

(2) Proposed use or uses *(check)*:
Domestic ☐ Municipal ☐
Irrigation ☐ Industrial ☐
Domestic and Irrigation ☐ Test well ☐
Other Stock

(3) Equipment used *(check)*:
Rotary ☐
Cable ☑
Dug well ☐
Other

(4) Type of work *(check)*:
New well ☑ Reconditioning of well ☐
Deepening existing well ☐

(5) Well log:
Total depth of well 236 ft.

Depth From Ground Surface	Give details of formations penetrated, such as silt, peat, muck, sand, gravel, clay, shale, sandstone, hardpan, rock. Include size of gravel (diameter) and sand (fine, medium, coarse), color of material, structure (loose, packed, cemented, soft, hard, brittle).
0 ft. to 5 ft.	Topsoil
[illegible]	[illegible]

DIVISION OF OIL & GAS
RECEIVED
JAN 1 2 1953
SANTA MARIA CALIFORNIA

If additional space is required, continue on DWR Form No. 246—Supplement, and attach to respective report copies.

(6) Casing left in well:

LENGTH FT.	DIAMETER INCHES	SINGLE, DOUBLE, WELDED, OTHER	LBS. PER FOOT OR GAGE OF CASING	SEATING BELOW GROUND SURFACE, FT.
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]

Type and size of shoe or well ring [illegible] Welded joints—☑ Yes ☐ No

D.W.R. FORM NO. 245

34° 50' 32.50"

23971 3-50 40M QUIN SPO

9N 32W 20 H

File Original, Duplicate and Triplicate with the
DIVISION OF WATER RESOURCES
P. O. BOX 1079
SACRAMENTO 8, CALIFORNIA

SHEET 2

WATER WELL DRILLERS REPORT

(Sections 7076, 7077, 7078, Water Code)

Do Not Fill In
State Well No. 9N/32W-20H
Other Well No.
Region

(7) Perforations:

Type of perforator used

Perforated 225 ft. to 236 ft. Hole size 18" x 6 No. of holes 27

(8) Water levels:

Depth at which water first encountered Elev. 1150 ~~1180~~ W.S. 490'? m 1952 ft.

Depth to water before perforating ft.

Depth to water after perforating 210 ft.

Note any change in water level while drilling

(9) Well pumping test:

Date of test By whom

Depth to water when test started ft.

G.P.M. at beginning of test

Drawdown from standing level ft.

G.P.M. at completion of test

Drawdown at completion of test ft.

Length of time tested

Temperature of water

Was gas present in water? ☐ Yes ☐ No

(10) General:

Was well gravel packed? Size of rock Thickness of pack

Was a surface sanitary seal provided?

Were any strata sealed against pollution? ☐ Yes ☒ No If yes, attach detailed description.

Strata sealed

Was analysis made of water? ☐ Yes ☐ No If yes, attach copy.

Was electric log made of well? ☐ Yes ☐ No If yes, attach copy.

If well abandoned, was it plugged and sealed?

Method of plugging and sealing

DIVISION OF OIL & GAS
RECEIVED
JAN 1 2 1953
SANTA MARIA, CALIFORNIA

(11) Location:

North

1 MILE

Section No. 20

Township T-9-N

Range R-32-W

Base & Meridian

Show location of well in Section, thus (X)

Distances to section lines from well, N or ~~S~~ ft. 2110

and E or ~~W~~ ft. 1050

Show location of nearest known well, thus (O)

Distance to nearest known well ft.

(12) Time of work:

Work started date Completed date

Date of this report

WELL DRILLER'S STATEMENT:

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

[SIGNED] [signature]
Well Driller

By [signature]

License No. Classification

Dated July 28, 19 1952

D.W.R. FORM No. 246

23932 3-50 40M QUIN SPO

9N 32W 21

34 80 53.80 9N 32W 21A1 CC172

~~TRIPLICATE~~ 120 14 39.02
Owner's Copy

STATE OF CALIFORNIA
THE RESOURCES AGENCY
DEPARTMENT OF WATER RESOURCES

WATER WELL DRILLERS REPORT

Do not fill in
No. **294579**

Notice of Intent No. _____
Local Permit No. or Date MAR-21-1984

APN 101-050-005

State Well No. _____
Other Well No. _____

(1) OWNER: Name LOUIS COSTA (805)
Address RT 1 BOX 143 (937-4454)
City SANTA MARIA CALIF ZIP 93454

(2) LOCATION OF WELL (See instructions):
County SANTA BARBARA Owner's Well Number _____
Well address if different from above COVEN CHAPPEL APN 050-005
Township _____ Range _____ Section _____
Distance from cities, roads, railroads, fences, etc. _____

WELL LOCATION SKETCH

(3) TYPE OF WORK:
New Well ☑ Deepening ☐
Reconstruction ☐
Reconditioning ☐
Horizontal Well ☐
Destruction ☐ (Describe destruction materials and procedures in Item 12)

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

(5) EQUIPMENT:
Rotary ☑ Reverse ☐
Cable ☐ Air ☐
Other ☐ Bucket ☐

(6) GRAVEL PACK:
Yes ☑ No ☐ Size 1/4 x 1/8
Diameter of bore 18"
Packed from 22 to 322 ft.

(7) CASING INSTALLED:
Steel ☐ Plastic ☑ Concrete ☐

From ft.	To ft.	Dia. in.	Gage or Wall
0	322	5	200

(8) PERFORATIONS: Saw Slots
Type of perforation or size of screen

From ft.	To ft.	Slot size
80	140	.040
180	220	.040
280	300	.040

(9) WELL SEAL:
Was surface sanitary seal provided? Yes ☑ No ☐ If yes, to depth 22 ft.
Were strata sealed against pollution? Yes ☐ No ☑ Interval _____ ft.
Method of sealing _____

(10) WATER LEVELS:
Depth of first water, if known 96 ft.
Standing level after well completion _____ ft.

(11) WELL TESTS:
Was well test made? Yes ☑ No ☐ If yes, by whom? DRILLER
Type of test Pump ☑ Bailer ☐ Air lift ☐
Depth to water at start of test _____ ft. At end of test _____ ft.
Discharge 15 gal/min after 12 hours Water temperature _____
Chemical analysis made? Yes ☑ No ☐ If yes, by whom? CRI
Was electric log made Yes ☐ No ☑ If yes, attach copy to this report

(12) WELL LOG: Total depth 346 ft. Completed depth 322 ft.

from ft.	to ft.	Formation (Describe by color, character, size or material)
0	3	TOP SOIL
3	18	CEMENTED ROCK SAND + GRAVEL
18	23	CEMENTED ROCK SAND + GRAVEL
23	52	WHITE CLAY ROCK SAND + GRAVEL
52	71	PALE BROWN CLAY GRAVEL + SAND
71	77	DARK BROWN CLAY " "
77	91	GRAVEL + SAND
91	102	SAND COARSE
102	108	BROWN CLAY
108	158	GRAVEL SAND BROWN CLAY
158	161	WHITE CLAY RGT BROWN CLAY
161	240	SAND GRAVEL + CLAY
240	277	SAND W/ SOME CLAY
277	328	COARSE SAND SOME GRAVEL
328	346	SAND + CLAY (BROWN)

Work started 4-4 1989 Completed 4-14 1989

WELL DRILLER'S STATEMENT:
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
Signed _____ (Well Driller)
NAME TERRY McCORMICK (Person, firm, or corporation) (Typed or printed)
Address 1345 SOLOMON RD 2321
City ORCUTT CALIF ZIP 93455
License No. 322158 Date of this report 4-22-89

NOT FOR PUBLIC USE
WATER CODE SEC. 13752

DWR 188 (REV. 12-86) IF ADDITIONAL SPACE IS NEEDED, USE NEXT CONSECUTIVELY NUMBERED FORM 86 96355

Enseco

Enseco - CRL / South Coast
7440 Lincoln Way • Garden Grove, CA 92641
(714) 898-6370 • (213) 598-0458 • (800) LAB-1-CRL
FAX: (714) 891-5917

May 11, 1989

ENSECO-CRL SANTA MARIA
2325 Skyway Drive, Suite K
Santa Maria, CA 93455
ATTN: Mr. Rashmi Shah

Analysis No: G-8911408-001
Date Sampled: 21-APR-1989
Date Sample Rec'd: 24-APR-1989
Project: (#3445) Louis Costa

Enclosed with this letter is the amended report on the chemical and physical analyses on the sample from ANALYSIS NO: G-8911408-001 shown above.

The sample was received by CRL in a chilled state, intact and with the chain-of-custody record attached. Sample seal was intact.

Preliminary data were provided on May 2, 1989 at 1:05 P.M.

Please note that ND( ) means not detected at the detection limit expressed within the parentheses.

REVEIWED

APPROVED

The Report Cover Letter is an integral part of this report.

This report pertains only to the samples investigated and does not necessarily apply to other apparently identical or similar materials. This report is submitted for the exclusive use of the client to whom it is addressed. Any reproduction of this report or use of this Laboratory's name for advertising or publicity purposes without authorization is prohibited.

Enseco - CRL / South Coast
7440 Lincoln Way • Garden Grove, CA 92641
(714) 898-6370 • (213) 598-0458 • (800) LAB-1-CRL
FAX: (714) 891-5917

Enseco

Laboratory Report

ENSECO CRL SANTA MARIA
2325 SKYWAY DR, STE K
SANTA MARIA, CA 93455
ATTN: Mr. Rashmi Shah

Analysis No.: G-8911408-001
Date Sampled: 21-APR-1989
Date Sample Rec'd: 24-APR-1989
Date Analyzed: 25-APR-1989
27-APR-1989
28-APR-1989
29-APR-1989
1-MAY-1989
26-APR-1989
Sample Type: LIQUID

Project: (3445) LOUIS COSTA
Sample ID: 3445-1 FOXEN CYN.

Parameter	Units	Result	Blank	Detection Limit
pH (EPA 9040)	Units	7.38	NA	NA
Alkalinity (Calcium Carbonate) (EPA 310.1)	mg/L	264.	ND	10
Hydroxide (OH) (EPA 310.1)	mg/L	ND	ND	3
Bicarbonate (HCO3) (EPA 310.1)	mg/L	322.	ND	10
Carbonate (CO3) (EPA 310.1)	mg/L	ND	ND	10
Total Hardness (CALCULATED)	mg/L	620.	NA	NA
Barium (EPA 200.7)	mg/L	ND	ND	0.02
Calcium (EPA 200.7)	mg/L	130.	ND	1
Copper (EPA 200.7)	mg/L	ND	ND	0.02
Iron (EPA 200.7)	mg/L	0.12	ND	0.05
Magnesium (EPA 200.7)	mg/L	72.	ND	1
Manganese (EPA 200.7)	mg/L	ND	ND	0.02
Sodium (EPA 200.7)	mg/L	64.	ND	0.1
Zinc (EPA 200.7)	mg/L	0.16	ND	0.02
Arsenic (EPA 206.3)	mg/L	ND	ND	0.005
Cadmium (EPA 213.2)	mg/L	ND	ND	0.001
Chromium (Total) (EPA 218.2)	mg/L	ND	ND	0.01
Lead (EPA 239.2)	mg/L	ND	ND	0.01
Mercury (EPA 245.1)	mg/L	ND	ND	0.001
Selenium (EPA 270.3)	mg/L	ND	ND	0.005
Silver (EPA 272.2)	mg/L	ND	ND	0.01
Color (EPA 110.2)	CU	ND	ND	3.
Odor (EPA 140.1)	TON	NOO*	NA	1
Total Dissolved Solids (EPA 160.1)	mg/L	1,020.	ND	10
Turbidity (EPA 180.1)	NTU	7.6	ND	0.1
Chloride (EPA 300.0)	mg/L	41.	ND	1.
Sulfate (EPA 300.0)	mg/L	400.	ND	10.
Fluoride-Total (EPA 340.2)	mg/L	0.36	ND	0.1
MBAS (EPA 425.1)	mg/L	ND	ND	0.1
Cyanide, Total (EPA 9012)	mg/L	ND	ND	0.01
Electro-conductivity (EPA 9050)	umhos/cm	960.	NA	NA
Nitrate as Nitrogen (EPA 300.0)	mg/L	1.2	ND	0.2

*No odor observed.

The Report Cover Letter is an integral part of this report.
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Enseco

Enseco - CRL/Central Coast
2325 Skyway Drive, Suite K • Santa Maria, California 93455
(805) 922-2776 • FAX: (805) 922-5897

June 9, 1989

Louis Costa
Rt. 1, Box 143
Santa Maria, CA 93453

Dear Mr. Costa:

Enclosed with this letter is the report on the chemical and physical analyses on the samples for the APN #10105005 project (Job #3684).

The samples were received by Enseco-CRL with a Chain-Of-Custody record.

Please note that ND( ) means not detected at the detection limit expressed within the parenthesis.

If further assistance is required, please feel free to contact us.

Sincerely,

Rashmi Shah (RS)

Rashmi Shah
Laboratory Director

RS:cm

Enclosure(s)

This report pertains only to the samples investigated and does not necessarily apply to other apparently identical or similar materials. This report is submitted for the exclusive use of the client to whom it is addressed. Any reproduction of this report or use of this Laboratory's name for advertising or publicity purposes without authorization is prohibited.

Enseco

Enseco - CRL/Central Coast
2325 Skyway Drive, Suite K • Santa Maria, California 93455
(805) 922-2776 • FAX: (805) 922-5897

DOHS Certification #188

L A B O R A T O R Y R E P O R T

TO: Louis Costa
Rt. 1, Box 143
Santa Maria, CA 93453

ATTN: Louis Costa

SAMPLE NUMBER: 3684-1
DATE SAMPLED: 06/08/89
DATE RECEIVED: 06/08/89
DATE REPORTED: 06/09/89

PROJECT NAME: APN #10105005
SAMPLE DESCRIPTION: Foxen Canyon

CONSTITUENTS	RESULTS	UNITS	EPA METHOD
Total Dissolved Solids	900	mg/l	160.1
Turbidity	ND(0.2)	NTU	180.1

Reviewed & Approved
Laboratory Director

This report pertains only to the samples investigated and does not necessarily apply to other apparently identical or similar materials. This report is submitted for the exclusive use of the client to whom it is addressed. Any reproduction of this report or use of this Laboratory's name for advertising or publicity purposes without authorization is prohibited.

9N 32W 21A2

CC173

34 50 55.63 120 14 31.41

SR# 101398

Permit No.

Page 1 of 2 pages

WELL PERMIT APPLICATION

TO: Environmental Health Division
Santa Barbara County Health Care Services

Date 2/3/00

Name of Well Owner PHil BATTAGLIA

Mailing Address PO. Box 86 Los Olivos CA 93441
Street, P.O. City State Zip Code Telephone

Well Site Location: Vicinity Map Attached ☐ (Check)

Assessor's Parcel No. 101-050-05 Street Address FOXEN CYN Rd.

Township _____ Range _____ Section _____ Rancho _____

Name of Well Driller _____

Company Name RON TAYLOR DRilling

Business Address 2801 MAHONEY Rd Date of Work

Contractor's License No. C-57 523 858 Start 2/4/00 Finish / /

OTHER WATER SOURCE: Public ☐ Private ☐ None ☒

Permit Type (Check)		Well Use (Check)		Drilling Method (Check)	
Construction	☒	Domestic	☒	Rotary	☒
Repair/Modification	☐	Agriculture	☒	Cable	☐
Destruction	☐	Cathodic	☐	Other	☐
Inactivation	☐	Test	☐		

Proposed Depth 200 ft.

Well Bore Diam 16 in.

Casing Information

Type: Steel ☐ PVC ☒ Other ☐

Wall/Gage _____ in.

Diameter 8 in.

Annular Seal Depth 50 ft.

Sealing Material (Check)

Neat Cement ☐ Clay ☐

Cement Grout ☐ Concrete ☒

RECEIVED

FEB 03 2000

SANTA BARBARA COUNTY
ENVIRONMENTAL HEALTH SERVICES

Additional Work Description: _____

For Department Use Only

Application Disposition:

Approved ☒

Denied ☐

Comments _____

I hereby agree to comply with all regulations of the County of Santa Barbara pertaining to well construction, repair, modification, destruction and inactivation. The property owner, well driller, or agent will furnish County Health Care Services a complete well log upon completion of well construction.

Signed [signature] 2/3/00
Applicant

$328 Fee paid on 2/3/00 #4002

Receipt No. 1610504

Paid By Ron Taylor

Name [signature]

Date 2/4/2000

S.B. ☐ Sol. ☐

S.M. ☒ Lom ☐

WHEN SIGNED BY HEALTH CARE SERVICES, THIS APPLICATION IS A PERMIT. HEALTH OFFICER SHALL BE NOTIFIED PRIOR TO ALL SEALING OPERATIONS. NOTE: PERMIT EXPIRES ONE YEAR FROM DATE ISSUED.

[initials] 3/2/00

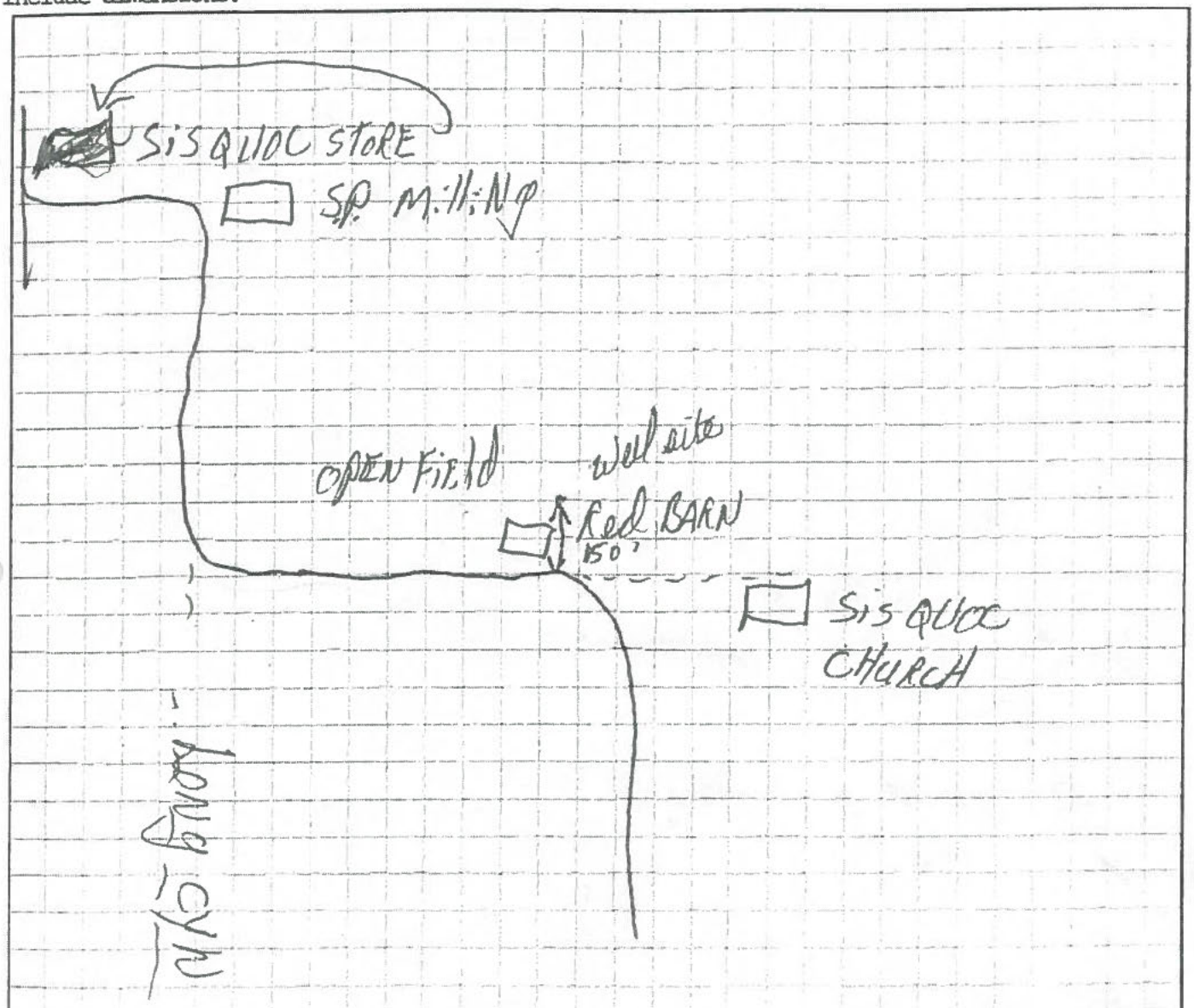
Sp # 101398

WELL PERMIT APPLICATION

Plot Plan (¼" = 20')

Permit No. _____

Indicate below the exact location of the proposed well with respect to the following items: Property lines, sewer lines and sewage disposal systems, animal enclosures, watercourses, flood plain, drainage pattern, existing wells, access roads, easements, and well site elevation. Include dimensions.



Plot plan prepared by

Name: _____

Signature: _____

Date: _____

Permit No. 101398
Page ___ of ___ pages

ENVIRONMENTAL HEALTH DIVISION
SANTA BARBARA COUNTY HEALTH CARE SERVICES
WELL PERMIT FIELD INVESTIGATION RECORD

Well Permit Application Received: Date 2 / 3 / 2000

Site Investigation By J. Davies Date 2 / 4 / 2000

Findings: (Check applicable boxes and give clearance)

- ☐ Overhead Power Lines ____
- ☐ Sewer Lines ____
- ☐ Leach Field ____
- ☐ Cesspool/Drywell ____
- ☐ Animal Enclosure ____
- ☐ Creek or Watercourse ____
- ☐ Petroleum Tank or Pipeline ____
- ☐ Other ____

Assessor - OK
Setbacks - OK

Application Reviewed and Approved: By J. Davies Date 2 / 4 / 2000

Work Investigation Record

Date 2/25/2000

Well Site #: 1

Casing Information

Type: Steel ☐ PVC ☒ Other ☐ ____

Class/Gage/NSF: F-480

ASTM#: SDR 21

Diameter: 8" Total Depth: 220'

Casing Schedule

0'	160'	=	Blank
160	220'	=	Perf
		=	
		=	
		=	
		=	
		=	

Borehole

Total Depth of Well: 220'

Annular Seal Depth: 52'

Well Bore Diameter: 15"

Sealing Material: G. Sack cement

Amount: 3 yds

Method of Pour: Pump

Use of Tremie: Yes

Driller(s): Ron Taylor

Comments: Production casing capped this date.

Final Inspection and Approval/Denial: By J. Davies Date 2/25/2000

Notice of Work Acceptance/Rejection Sent to Well owner On ~~2/25/2000~~ 3/1/2000

W-320P Rev. 12/89

101-050-005

Santa Barbara County
PUBLIC Health
DEPARTMENT

Environmental Health Services

2125 S. Centerpointe Pkwy., #333 • Santa Maria, CA 93455-1340
805/346-8460 • FAX 805/346-8485

Roger Herrera, MPA Director
Tara Brown, MBA Assistant Director
Elliot Schulman, MD, MPH Health Officer/Medical Director

March 1, 2000

Phil Battaglia
P.O. Box 86
Los Olivos, CA 93441

Dear Mr. Battaglia:

Subject: **Completion Report for Water Well Permit #101398 (Assessor's Parcel Number 101-050-005)**

This Department has reviewed the construction of the subject water well as related to the approval of the location of the well and the placement of the annular seal in the upper portion of the bore around the well casing. This work has been completed in conformity with the requirements of the Water Well Standards of the State Department of Water Resources, as adopted by the Santa Barbara County Water Well Ordinance.

If water from this well is intended to be utilized for domestic or drinking purposes, it will first be necessary to obtain a Water System Permit from this Department. The permit is required for any water system that will provide water to a dwelling unit or to any structure utilized for commercial or manufacturing purposes which requires potable water for human consumption or use.

Please contact the undersigned at the office indicated on this letterhead if you have any questions or if you need a Water Permit Application and a copy of the instructions for completing the form and for providing the necessary specifications on the system.

Sincerely,

John D. Davies, R.E.H.S.
Environmental Health Specialist

JDD/ce
WELLLTR.

PC: Assessor's Office

9N 32W 21D 101-050-004 CC174

34 50 51.06 120 15' 78.81"

QUADRUPLICATE
Use to comply with local requirements

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

Do not fill in
No. 051604

Notice of Intent No. _____
Local Permit No. or Date _____
State Well No. _____
Co. Permit # Other Well No. 2043

(1) OWNER: Name C.C.M. Nielsen Et. El
Address 5950 Foxen Canyon Rd
City Santa Maria, CA Zip 93454

(2) LOCATION OF WELL (See instructions): County Santa Barbara Owner's Well Number 2
Well address if different from above
Township 9N Range 32W Section 21
Distance from cities, roads, railroads, fences, etc. 1/2 mile south of Foxen Canyon Rd, up Olivero Canyon. 50' east of Easement Rd.

WELL LOCATION SKETCH

(3) TYPE OF WORK:
New Well [X] Deepening [ ]
Reconstruction [ ]
Reconditioning [ ]
Horizontal Well [ ]
Destruction [ ] (Describe destruction materials and procedures in Item 10)

(4) PROPOSED USE:
Domestic [X]
Irrigation [X]
Industrial [ ]
Test Well [ ]
Stock [ ]
Municipal [ ]
Other [ ]

(5) EQUIPMENT:
Rotary [X] Reverse [ ]
Cable [ ] Air [ ]
Other [ ] Bucket [ ]

(6) GRAVEL PACK:
Yes [X] No [ ] Size 1/4" 1/8" 17½
Diameter of bore
Packed from 50 to 405 ft.

(7) CASING INSTALLED:
Steel [X] 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	405	8 5/8"	.250	216	405	.080 X 2½"

(9) WELL SEAL:
Was surface sanitary seal provided? Yes [X] No [ ] If yes, to depth 50 ft.
Were strata sealed against pollution? Yes [ ] No [ ] Interval _____ ft.
Method of sealing Top 50' cemented

(10) WATER LEVELS:
Depth of first water, if known _____ ft.
Standing level after well completion _____ ft.

(11) WELL TESTS:
Was well test made? Yes [ ] No [ ] If yes, by whom? _____
Type of test Pump [ ] Bailer [ ] 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? _____
electric log made? Yes [ ] No [ ] If yes, attach copy to this report

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

SEE ATTACHED SHEETS

CONFIDENTIAL
NOT FOR PUBLIC USE
WATER CODE SEC. 13752

RECEIVED
FEB 8 1979
Santa Barbara County
Environmental Health Services

Work started 12-26 1978 Completed 1-12 1979

WELL DRILLER'S STATEMENT:
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
SIGNED [signature] (Well Driller)
NAME Floyd V. Wells, Inc.
(Person, firm or corporation) (Typed or printed)
Address 1337 W. Betteravia Rd
City Santa Maria Ca Zip 93454
License No. #C57-229570 Date of this report 1-16-79

DWR 188 (REV. 7-76) IF ADDITIONAL SPACE IS NEEDED, USE NEXT CONSECUTIVELY NUMBERED FORM

SANTA MARIA, CALIFORNIA

FLOYD V. WELLS, INC.

GOLETA, CALIFORNIA

WATER WELL DRILLING LOG

Owner: C.C.M. Nielsen Et. El. Company: C.C.M. Nielsen Et. El.

Well No. 2 Rig: 7

Location of Well: 1/2 mile south of Foxen Canyon Rd, up Olivero Canyon. 50' east of Easement Rd t9N R32W Section 21

Surface Pipe or Seal: Top 50' cemented Size: Depth: Gauge:

Well Bore Diameter: 17½ Depth of Casing Set: 405'

Casing Size: 8 5/8" O.D. Gauge: .250 Type: Steel

Perforations: Size: .080" X 2½" Type: Vertical slot Number: 24 Rows

Perforation Location from Ground Level: 216' From: 0 To: 216' blank

216 400 perf

400 405 blank bullnose

Gravel Pack: Type: Dumped Size: 1/4" X 1/8" B.F. Quantity: 32 3/4" ton

Bits: No. Used: 4 Size: 2 - 9 7/8" 2- 17½"

Drilling Method: Air: Foam: Mud: X

Material Used: Gel: 80 Sacks P-95: Foam:

Well Started: 12-26-78 Well Completed: 1-12-79 Driller: Clarence

TEST PUMPING INFORMATION

Production Test:

Standing Water Level: Pumping Level:

G.P.M.: Pumping Level:

REMARKS

Ken Vertrees, Printers, Lithographers - Santa Maria, CA

SANTA MARIA, CALIFORNIA

FLOYD V. WELLS, INC.

GOLETA, CALIFORNIA

FORMATION LOG

FROM	TO	DESCRIPTION
0	30	Course sand and gravel w/tan clay strips
30	40	Yellow clay w/gravel imbedded
40	60	Fine and course sand and gravel
60	65	Yellow clay
65	95	Fine and course sand and gravel
95	110	Yellow sandy clay
110	170	Fine, course sand
170	249	Fine sand
249	259	Yellow sandy clay
259	282	Course fine sand w/tan clay strips
282	410	Course sand and gravel
410	420	Gray blue sand and gravel w/gray clay

Permit No. 2043

Page ___ of ___ pages

ENVIRONMENTAL HEALTH DIVISION
SANTA BARBARA COUNTY HEALTH CARE SERVICES
WELL PERMIT FIELD INVESTIGATION RECORD

Well Permit Application Received: Date 11/13/78

Site Investigation: By Arnold Zwicky Date 11/13/78

Findings: Site not subject to flooding. No sources of contamination within 200 feet of well site.

Application Reviewed and Approved: By Arnold Zwicky Date 11/13/78

Work Investigation Record

Findings: 1/11/79 Observed sealing of well to approx 52 feet with cement grout [illegible]
2/15/79 [illegible]

Final Inspection and Approval/Denial: By [illegible] Date 2/16/79

Notice of Work Acceptance/Rejection Sent to Well Owner On 2/16/79.

H-95 10/75

9N 32W 21D

Permit No. № 2043

WELL PERMIT APPLICATION

Page 1 of 2 pages

Environmental Health Division
Santa Barbara County Health Care Services

Date 11/13/78

Name of Well Owner C.C.M. Nielsen Et. Al.

Mailing Address 5950 Foxen Canyon Rd Santa Maria, CA 93454
Street, P.O. City State Zip Code Telephone

Well Site Location: Vicinity Map Attached [X] (Check)

X Assessor's Parcel No. 101-050-04-001 Street Address RT 1 Box 150-A

X Township 9N Range 32W Section 21 Rancho

Name of Well Driller Floyd V. Wells, Inc.

Company Name Floyd V. Wells, Inc.

Business Address 1337 W. Betteravia Rd Date of Work

Contractor's License No. #C57-229570 Start / / Finish / /

Permit Type (Check)		Well Use (Check)		Drilling Method (Check)	
Construction	XX	Domestic	XX	Rotary	X
Repair/Modification		Agriculture	XX	Cable	
Destruction		Cathodic		Other	
Abandonment		Test			

Proposed Depth 425 ft.

Well Bore Diam 15 in.

Casing Information

Type: Steel XX PVC Other

Wall/Gage .250 in.

Diameter 8 5/8 in.

Annular Seal Depth 50 ft.

Sealing Material (Check)

Neat Cement Clay

Cement Grout XX Concrete

Additional Work Description:

For Department Use Only

Application Disposition:

Approved [X]

Denied

Comments

I hereby agree to comply with all regulations of the County of Santa Barbara pertaining to well construction, repair, modification, destruction and abandonment. The property owner, well driller, or agent will furnish County Health Care Services a complete well log upon completion of well construction.

Signed [signature] / /
Applicant Date

$45 Fee paid on 11/13/78

Receipt No. 419165

[signature]
Name

Nov. 13, 1978
Date

S.B. Sol

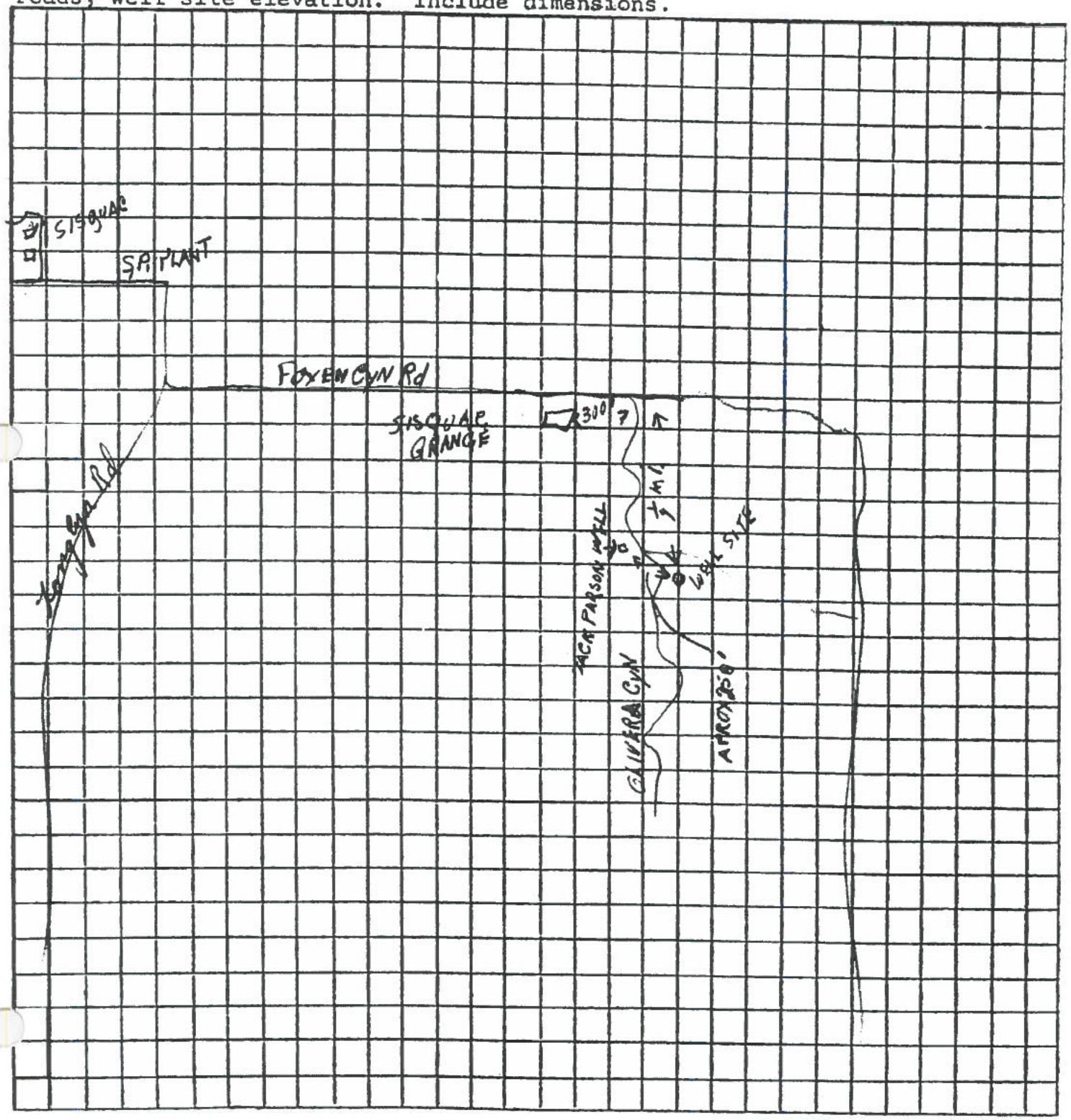
S.M. [✓] Lom

WHEN SIGNED BY HEALTH CARE SERVICES, THIS APPLICATION IS A PERMIT. HEALTH OFFICER SHALL BE NOTIFIED PRIOR TO ALL SEALING OPERATIONS. NOTE: PERMIT EXPIRES ONE YEAR FROM DATE ISSUED.

H-96 (Rev. 7/77)

WELL PERMIT APPLICATION
Plot Plan
Scale: 1/4" = 20'

Indicate below the exact location of the well with respect to the following items within 200' of the well: Property lines, sewers and private sewage systems, water bodies on watercourses, drainage pattern, existing wells, access roads, well site elevation. Include dimensions.



9N 32W 22

9N 32W 22N

101-050-11

CC175

ORIGINAL
File with DWR

Page 1 of 1

Owner's Well No. 1

Date Work Began 6/06/04, Ended 6/10/04

Local Permit Agency Santa Barbara Co. Environmental Health

Permit No. SR0103245 Permit Date 5/28/04

STATE OF CALIFORNIA

WELL COMPLETION REPORT

Refer to Instruction Pamphlet

No. 0907625

— DWR USE ONLY — DO NOT FILL IN —

STATE WELL NO./STATION NO.

LATITUDE LONGITUDE

APN/TRS/OTHER

GEOLOGIC LOG

ORIENTATION (✓) X VERTICAL ___ HORIZONTAL ___ ANGLE ___ (SPECIFY)

DRILLING METHOD Mud Rotary FLUID Bentonite

DEPTH FROM SURFACE Ft. to Ft.	DESCRIPTION *Describe material, grain size, color, etc.*
	Please See Attached Formation Log

NOT FOR PUBLIC CONFIDENTIAL WATER CODE

TOTAL DEPTH OF BORING 205 (Feet)

TOTAL DEPTH OF COMPLETED WELL 205 (Feet)

WELL OWNER

Name Martin Hans Petersen

Mailing Address 26402 Calle Lucana

San Juan Capistrano CA 92675

CITY STATE ZIP

WELL LOCATION

Address 7055 Foxen Canyon Road

City Santa Maria

County Santa Barbara

APN Book 101 Page 050 Parcel 11

Township 9N Range 32W Section 22

Lat ___ DEG. ___ MIN. ___ SEC. N Long ___ DEG. ___ MIN. ___ SEC. W

LOCATION SKETCH

NORTH

34°50' 15.88

120 14' 15.61

Please See Attached Map

WEST EAST

SOUTH

Illustrate or Describe Distance of Well from Roads, Buildings, Fences, Rivers, etc. and attach a map. Use additional paper if necessary. PLEASE BE ACCURATE & COMPLETE.

ACTIVITY (✓)

X NEW WELL

MODIFICATION/REPAIR
___ Deepen
___ Other (Specify)

___ DESTROY (Describe Procedures and Materials Under "GEOLOGIC LOG")

USES (✓)

WATER SUPPLY
X Domestic ___ Public
X Irrigation ___ Industrial

MONITORING ___
TEST WELL ___
CATHODIC PROTECTION ___
HEAT EXCHANGE ___
DIRECT PUSH ___
INJECTION ___
VAPOR EXTRACTION ___
SPARGING ___
REMEDIATION ___
OTHER (SPECIFY) ___

WATER LEVEL & YIELD OF COMPLETED WELL

DEPTH TO FIRST WATER 75 (Ft.) BELOW SURFACE

DEPTH OF STATIC WATER LEVEL 75 (Ft.) & DATE MEASURED 6/22/04

ESTIMATED YIELD * 33 (GPM) & TEST TYPE

TEST LENGTH 24 (Hrs.) TOTAL DRAWDOWN 21 (Ft.)

* *May not be representative of a well's long-term yield.*

CASING (S)

DEPTH FROM SURFACE Ft. to Ft.	BORE-HOLE DIA. (Inches)	TYPE (✓) BLANK	SCREEN	CON-DUCTOR	FILL PIPE	MATERIAL / GRADE	INTERNAL DIAMETER (Inches)	GAUGE OR WALL THICKNESS	SLOT SIZE IF ANY (Inches)
0 70	12	x				F480	6	.316	
70 200	12		x			F480	6	.316	.040

ANNULAR MATERIAL

DEPTH FROM SURFACE Ft. to Ft.	CE-MENT (✓)	BEN-TONITE (✓)	FILL (✓)	FILTER PACK (TYPE/SIZE)
0 50	x			Slurry
50 205			x	Lapis #3

ATTACHMENTS (✓)

___ Geologic Log
___ Well Construction Diagram
___ Geophysical Log(s)
___ Soil/Water Chemical Analyses
___ Other ___

ATTACH ADDITIONAL INFORMATION, IF IT EXISTS.

CERTIFICATION STATEMENT

I, the undersigned, certify that this report is complete and accurate to the best of my knowledge and belief.

NAME Floyd V. Wells, Inc.
(PERSON, FIRM, OR CORPORATION) (TYPED OR PRINTED)

1337 W. Betteravia Road, Santa Maria CA 93455
ADDRESS CITY STATE ZIP

Signed ___ C-57 LICENSED WATER WELL CONTRACTOR

6/30/04 DATE SIGNED

C57-229570 C-57 LICENSE NUMBER

PETERSON, MARTIN H

FORMATION LOG		
DEPTH	DEPTH	FORMATION DESCRIPTION
0	26	¼" TO ¾" gravels, Coarse sand, Fine sand
26	46	1 ¼" to ¼" gravels, Coarse sand, Fine sand, small gravels
46	58	Light brown sand with some clay, some white clay
58	65	Coarse sand, Fine sand, ¼" gravel
65	75	Coarse sand, Fine sand, small gravels
75	82	Coarse sand, Fine sand, Yellow sand with some clay
82	86	Brown clay, Coarse sand, Fine sand, ¼" gravels
86	97	Blue clay, Coarse sand, Fine sand, some small gravels
97	112	Small gravels, Coarse sand, Fine sand, some ¼" gravels
112	131	¼" to ½" gravels, Dark blue gravels, Fine sand
131	145	Blue clay, Fine sand, Coarse sand, small gravel
145	154	Black clay, Dark blue clay
154	179	Blue clay, Coarse sand, fine sand, Coarse gravel
179	185	Blue clay, ¼" gravel, Coarse gravel
185	200	Blue clay, ¼" to ½" gravel, Coarse gravel
200	220	Black clay, gravel, Shale gravel

CREEK ENVIRONMENTAL LABORATORIES, INC.
141 SUBURBAN ROAD, SUITE C-5 · SAN LUIS OBISPO, CA 93401 · (805) 545-9838 · FAX (805) 545-0107

Post-it® Fax Note 7671	Date 07/06	# of pages ▸ 3
To Petie	From Tommy	
Co./Dept. CBP	Co EVW Inc	
Phone # 688-1400	Phone # 925-8626	
Fax # 688-1490	Fax # 928-7826	

Page 1

Log Number: 04-C7539
Order: L3097
Project: Peterson
Received: 06/21/04

REPORT OF ANALYTICAL RESULTS

SAMPLE DESCRIPTION	SAMPLED BY	SAMPLED DATE @ TIME	MATRIX
Well Water	Kevin Betita	06/21/04@12:35	Drinking Water

ANALYTE	RESULT	DLR	UNITS	METHOD	ANALYZED
Total Alkalinity as CaCO3	430	2	mg/L	SM 2320B	06/25/04
Chloride	140	10	mg/L	EPA 300.0	06/22/04
Total Cyanide	Not Detected	0.005	mg/L	EPA 335.2	06/29/04
Color	2	1	units	SM 2120B	06/21/04
Electrical Conductance *	2,000	1	umhos/cm	SM 2510	06/21/04
Fluoride	0.2	0.1	mg/L	EPA 300.0	06/21/04
Langlier Index (Corrosivity)	0.7	---	pH units	SM 2330B	06/28/04
MBAS (Anionic Surfactants)	Not Detected	0.05	mg/L	SM 5540 C	06/23/04
Nitrate as N	Not Detected	0.1	mg/L	EPA 300.0	06/21/04
Nitrate as NO3	Not Detected	0.4	mg/L	EPA 300.0	06/21/04
Nitrite as N	Not Detected	0.1	mg/L	EPA 300.0	06/21/04
Odor	Not Detected	1	TON	SM 2150B	06/21/04
pH	7.5	0.1	units	EPA 150.1	06/21/04
Sulfate	500	5	mg/L	EPA 300.0	06/22/04
Total Dissolved Solids *	1,500	10	mg/L	EPA 160.1	06/23/04
Turbidity	0.6	0.1	NTU	EPA 180.1	06/21/04
Silver	Not Detected	0.01	mg/L	EPA 200.7	06/23/04
Aluminum	Not Detected	0.05	mg/L	EPA 200.7	06/23/04
Arsenic	0.003	0.002	mg/L	EPA 200.9	06/26/04
Barium	Not Detected	0.1	mg/L	EPA 200.7	06/23/04
Beryllium	Not Detected	0.001	mg/L	EPA 200.7	06/23/04
Calcium	140	0.03	mg/L	EPA 200.7	06/23/04
Hardness	760	1	mg/L CaCO3	EPA 200.7	06/28/04
Cadmium	Not Detected	0.001	mg/L	EPA 200.9	06/27/04
Chromium	Not Detected	0.01	mg/L	EPA 200.7	06/23/04
Copper	Not Detected	0.05	mg/L	EPA 200.7	06/23/04
Iron	0.1	0.1	mg/L	EPA 200.7	06/23/04
Mercury	Not Detected	0.001	mg/L	EPA 245.1	06/26/04
Potassium	4.8	0.1	mg/L	EPA 200.7	06/23/04
Magnesium	100	0.03	mg/L	EPA 200.7	06/23/04

PRINTED ON RECYCLED PAPER

CREEK ENVIRONMENTAL LABORATORIES, INC.
141 SUBURBAN ROAD, SUITE C-5 · SAN LUIS OBISPO, CA 93401 · (805) 545-9838 · FAX (805) 545-0107

Scott Fisher
Floyd V.Wells, Inc
1337 W.Betteravia Road
Santa Maria, CA 93455

Log Number: 04-C7539
Order: L3097
Project: Peterson
Received: 06/21/04

REPORT OF ANALYTICAL RESULTS

SAMPLE DESCRIPTION	SAMPLED BY	SAMPLED DATE @ TIME	MATRIX
Well Water	Kevin Betita	06/21/04@12:35	Drinking Water

ANALYTE	RESULT	DLR	UNITS	METHOD	ANALYZED
Manganese	✗ 0.08	0.02	mg/L	EPA 200.7	06/23/04
Sodium	180	0.05	mg/L	EPA 200.7	06/23/04
Nickel	Not Detected	0.01	mg/L	EPA 200.7	06/23/04
Lead	Not Detected	0.005	mg/L	EPA 200.9	06/25/04
Antimony	Not Detected	0.006	mg/L	EPA 200.9	06/24/04
Selenium	Not Detected	0.005	mg/L	EPA 200.9	06/29/04
Thallium	Not Detected	0.001	mg/L	EPA 200.9	06/24/04
Zinc	Not Detected	0.05	mg/L	EPA 200.7	06/23/04

DLR = Detection Limit for Reporting. Results of "Not Detected" are below DLR.

CREEK ENVIRONMENTAL LABORATORIES

Lab Manager, Mary Ann Long

PRINTED ON RECYCLED PAPER

Santa Barbara County
PUBLIC Health
DEPARTMENT

Environmental Health Services

2125 S. Centerpointe Pkwy., #333 • Santa Maria, CA 93455-1340
805/346-8460 • FAX 805/346-8485

June 9, 2004

(b) (6)

Subject: **Completion Report for Water Well Permit #103245**
(Assessor's Parcel Number: 101-050-011, @ 7055 Foxen Cyn. Rd.)

This Department has reviewed the construction of the subject water well as related to the approval of the location of the well and the placement of the annular seal in the upper portion of the bore around the well casing. This work has been completed in conformity with the requirements of the Water Well Standards of the State Department of Water Resources, as adopted by the Santa Barbara County Water Well Ordinance.

If water from this well is intended to be utilized for domestic or drinking purposes, it will first be necessary to obtain a Water System Permit from this Department. The permit is required for any water system that will provide water to a dwelling unit or to any structure utilized for commercial or manufacturing purposes which requires potable water for human consumption or use.

Please contact the undersigned at the office indicated on this letterhead if you have any questions, or if you need a Water Permit application and a copy of the instructions for completing the form, and for providing the necessary specifications on the system.

Sincerely,

John D. Davies, R.E.H.S.
Environmental Health Specialist

PC: Assessor's Office

Permit No. [illegible]
Page ___ of ___ pages

ENVIRONMENTAL HEALTH DIVISION
SANTA BARBARA COUNTY HEALTH CARE SERVICES
WELL PERMIT FIELD INVESTIGATION RECORD

Well Permit Application Received: Date 6/1/04

Site Investigation By J. Davies Date 6/3/04

Findings: (Check applicable boxes and give clearance)

- ☐ Overhead Power Lines
- ☐ Sewer Lines
- ☐ Leach Field
- ☐ Cesspool/Drywell
- ☐ Animal Enclosure
- ☐ Creek or Watercourse
- ☐ Petroleum Tank or Pipeline
- ☐ Other

Setbacks - OK

Assessor - OK

Application Reviewed and Approved: By J. Davies Date 6/4/04

Work Investigation Record

Date 6/9/04

Well Site #: 1

Casing Information

Type: Steel ☐ PVC ☒ Other ☐ ___

Class/Gage/NSF: SDR21

ASTM#: F480

Diameter: 6" Total Depth: 205

Casing Schedule

0'	- 70'	=	Blank
70	- 200	=	Screen
200	- 205	=	Blank
	-	=	
	-	=	
	-	=	
	-	=	

Borehole

Total Depth of Well: 205

Annular Seal Depth: 50'

Well Bore Diameter: 12"

Sealing Material: 6-sack cement

Amount: 2.5 yds

Method of Pour: Pump

Use of Tremie: Yes - 50'

Driller(s): Floyd V. Wells

Comments: Production casing capped this date

Final Inspection and Approval/Denial: By J. Davies Date 6/9/04

Notice of Work Acceptance/Rejection Sent to Well owner On 6/10/04

W-320P Rev. 12/89

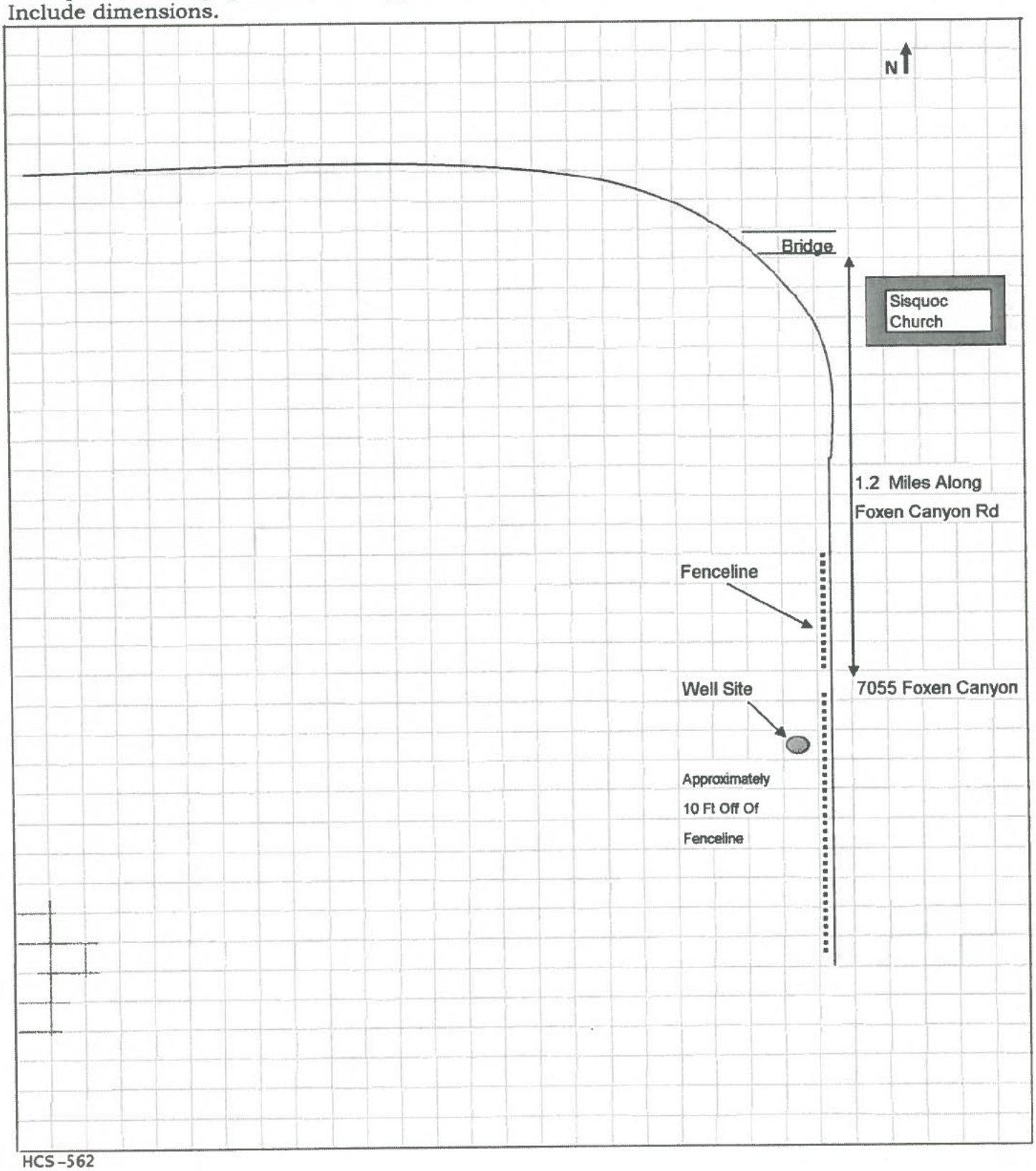
-174

WELL PERMIT APPLICATION

Permit No. SR0103245

Plot Plan (1/4" = 20')

Indicate below the exact location of the proposed well with respect to the following items: Property lines, sewer lines and sewage disposal systems, animal enclosures, watercourses, flood plain, drainage pattern, existing wells, access roads, easements, and well site elevation. Include dimensions.



HCS-562

Enseco

Enseco - CRL / Central Coast
2325 Skyway Drive, Suite K • Santa Maria, California 93455
(805) 922-2776 • FAX: (805) 922-5897

August 21, 1989

Dorothy Peterson
P.O. Box 6653
Santa Maria, CA 93456

Dear Ms. Peterson:

Enclosed with this letter is the report on the chemical and physical analyses on the samples for the Foxen Canyon Resample project (Job #3905). A copy of the report was sent to Mr. Terry McCormick on August 21, 1989.

The samples were received by Enseco-CRL with a Chain-Of-Custody record.

Please note that ND( ) means not detected at the detection limit expressed within the parenthesis.

If further assistance is required, please feel free to contact us.

Sincerely,

Rashmi Shah
Laboratory Director

RS:cm

Enclosure(s)

The Report Cover Letter is an integral part of this report.

This report pertains only to the samples investigated and does not necessarily apply to other apparently identical or similar materials. This report is submitted for the exclusive use of the client to whom it is addressed. Any reproduction of this report or use of this Laboratory's name for advertising or publicity purposes without authorization is prohibited.

Enseco -

Enseco - CRL / Central Coast
2325 Skyway Drive, Suite K • Santa Maria, California 93455
(805) 922-2776 • FAX: (805) 922-5897

DOHS Certification #188

L A B O R A T O R Y R E P O R T

TO: Dorothy Peterson
P.O. Box 6653
Santa Maria, CA 93456

SAMPLE NUMBER: 3905
DATE SAMPLED: 07/27/89
DATE RECEIVED: 07/31/89
DATE REPORTED: 08/21/89

PROJECT NAME: Foxen Canyon Resample

CRL ID	CLIENT SAMPLE I.D.	Chromium EPA 200.7 mg/l	Electrical Conductivity EPA 120.1 umhos/cm	Sulfate EPA 300.0 mg/l	Total Dissolved Solids EPA 160.1 mg/l
1	Foxen Canyon	0.022 ck .05	2,900 1600	740 500	2,200 1,000

Reviewed & Approved
Laboratory Director

The Report Cover Letter is an integral part of this report.
This report pertains only to the samples investigated and does not necessarily apply to other apparently identical or similar materials. This report is submitted for the exclusive

9N 32W 27

[redacted] 9N 32W 27F

CC335

File with DWR

Page ___ of ___

Owner's Well No. ___

STATE OF CALIFORNIA

WELL COMPLETION REPORT

Refer to Instruction Pamphlet

No. 469900

Date Work Began 12/20/96, Ended 1/11/96

Local Permit Agency Santa Barbara

Permit No. 518 Permit Date 1/13/97

DWR USE ONLY — DO NOT FILL IN

STATE WELL NO./STATION NO.

LATITUDE LONGITUDE

APN/TRS/OTHER

GEOLOGIC LOG

ORIENTATION (✓) X VERTICAL ___ HORIZONTAL ___ ANGLE ___ (SPECIFY)

DEPTH TO FIRST WATER ___ (Ft.) BELOW SURFACE

DEPTH FROM SURFACE Ft.	to Ft.	DESCRIPTION (Describe material, grain size, color, etc.)
0	3	Top Soil
3	18	Brown Clay & Gravel Mix
18	46	Light Brown Clay/Gravel Mix
46	75	Light Brown Clay
75	88	Shale Gravel & Sand
88	96	Light Brown Clay
96	105	Shale Gravel & Sand
105	118	Light Brown Clay & Gravel
118	127	Shale Gravel & Sand
127	148	Light Brown Clay
148	155	Shale Gravel
155	172	Light Brown Clay
172	180	Shale Gravel
180	183	Light Brown Clay
183	192	Shale Gravel
192	198	Brown Clay
198	206	Shale Gravel
206	218	Brown Clay
218	226	Shale Gravel
226	235	Gravel & Light Brown Clay
235	242	Shale Gravel
242	248	Light Brown Clay
248	253	Shale Gravel
253	286	Brown Clay Some Gravel
286	304	Shale Gravel
304	318	Light Brown Clay
318	324	Blue Shale Gravel
324	338	Brown Clay
338	353	Shale Gravel
353	370	Brown Clay

TOTAL DEPTH OF BORING 940 (Feet)

TOTAL DEPTH OF COMPLETED WELL 860 (Feet)

WELL OWNER

Name [redacted]

Mailing Address [redacted]

CITY STATE ZIP

WELL LOCATION

Address Hayer Farms

City Los Olivos

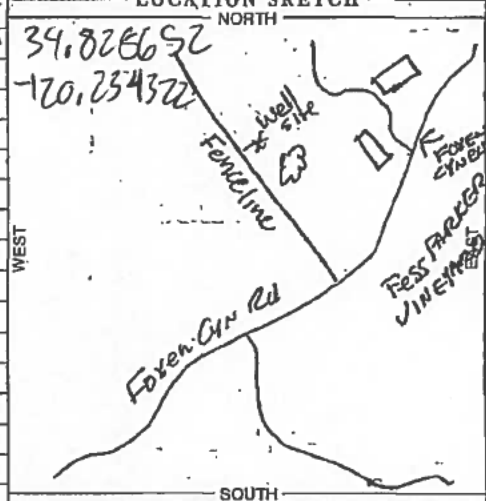
County Santa Barbara

APN Book 133 Page 080 Parcel 33

Township 9N Range 32W Section 27

Latitude ___ DEG. MIN. SEC. NORTH Longitude ___ DEG. MIN. SEC. WEST

LOCATION SKETCH



Illustrate or Describe Distance of Well from Landmarks such as Roads, Buildings, Fences, Rivers, etc. PLEASE BE ACCURATE & COMPLETE.

ACTIVITY (✓)

X NEW WELL

MODIFICATION/REPAIR

___ Deepen

___ Other (Specify)

___ DESTROY (Describe Procedures and Materials Under "GEOLOGIC LOG")

PLANNED USE(S) (✓)

___ MONITORING

WATER SUPPLY

___ Domestic

___ Public

X Irrigation

___ Industrial

___ "TEST WELL"

___ CATHODIC PROTECTION

___ OTHER (Specify)

DRILLING METHOD Rotary FLUID Bentonite

WATER LEVEL & YIELD OF COMPLETED WELL

DEPTH OF STATIC WATER LEVEL 92 (Ft.) & DATE MEASURED 1-11-97

ESTIMATED YIELD* 100 (GPM) & TEST TYPE Air Lift

TEST LENGTH ___ (Hrs.) TOTAL DRAWDOWN ___ (Ft.)

* *May not be representative of a well's long-term yield.*

CASING(S)

DEPTH FROM SURFACE Ft.	to Ft.	BORE-HOLE DIA. (inches)	TYPE (✓) BLANK	SCREEN	CON-DUCTOR	FILL PIPE	MATERIAL/GRADE	INTERNAL DIAMETER (inches)	GAUGE OR WALL THICKNESS	SLOT SIZE IF ANY (inches)
0	280	15	BLANK				PVC	8"	200	
280	360	15"	PERF				PVC	8"	200	.040
360	410	15"	BLANK				PVC	8"	200	
410	490	15"	SCREEN				PVC	8"	200	.040
490	650	15"	PERF				PVC	8"	200	.040
650	690	15"	SCREEN				PVC	8"	200	.040

ANNULAR MATERIAL

DEPTH FROM SURFACE Ft.	to Ft.	TYPE: CEMENT (✓)	BENTONITE (✓)	FILL (✓)	FILTER PACK (TYPE/SIZE)
0	51	X			
51	860	Monterey Mix			

ATTACHMENTS (✓)

___ Geologic Log

___ Well Construction Diagram

___ Geophysical Log(s)

___ Soil/Water Chemical Analyses

___ Other ___

ATTACH ADDITIONAL INFORMATION, IF IT EXISTS.

CERTIFICATION STATEMENT

I, the undersigned, certify that this report is complete and accurate to the best of my knowledge and belief.

NAME [redacted]

(PERSON, FIRM, OR CORPORATION) (TYPED OR PRINTED)

ADDRESS [redacted] CITY STATE ZIP

Signed [redacted] 2/3/97 DATE SIGNED

432080 C-57 LICENSE NUMBER

DWR 188 REV. 7-90 IF ADDITIONAL SPACE [redacted] UMBERED FORM

Cmt 469900

ORIGINAL
File with DWR
Page 2 of 3
Owner's Well No. _____
Date Work Began _____, Ended _____
Local Permit Agency _____
Permit No. _____ Permit Date _____

STATE OF CALIFORNIA
WELL COMPLETION REPORT
Refer to Instruction Pamphlet
No. ~~469904~~

DWR USE ONLY — DO NOT FILL IN
STATE WELL NO./STATION NO.
LATITUDE LONGITUDE
APN/TRS/OTHER

GEOLOGIC LOG

ORIENTATION (✓) ___ VERTICAL ___ HORIZONTAL ___ ANGLE ___ (SPECIFY)
DEPTH TO FIRST WATER _____ (Ft.) BELOW SURFACE

DEPTH FROM SURFACE Ft.	to Ft.	DESCRIPTION *Describe material, grain size, color, etc.*
370	380	Shale Gravel
380	400	Brown Clay & Gravel Mix
400	427	Shale Gravel
427	430	Chattering Brown Clay
430	451	Shale Gravel
451	482	Light Brown Clay
482	493	Shale Gravel
493	498	Brown Clay
498	522	Chattering Brown Clay
522	531	Shale Gravel
531	549	Chattering Light Brown Clay
549	560	Brown Clay
560	565	Shale Gravel
565	568	Chattering CLay
568	592	Shale Gravel
592	598	Light Brown Clay
598	604	Gravels
604	620	Chattering Light Brown Clay
620	625	Shale Gravel
625	649	Chattering Clay
649	675	Light Brown Clay
675	683	Shale Gravel
683	690	Light Brown Clay
690	695	Shale Gravel
695	699	Light Brown Clay
699	707	Shale Gravel & Sand
707	733	Light Brown Clay
733	738	Gravel & Sand
738	745	Light Brown Clay
745	755	Shale Gravel

TOTAL DEPTH OF BORING _____ (Feet)
TOTAL DEPTH OF COMPLETED WELL _____ (Feet)

WELL OWNER

Name [redacted]
Mailing Address
CITY STATE ZIP

WELL LOCATION

Address
City
County
APN Book _____ Page _____ Parcel _____
Township _____ Range _____ Section _____
Latitude _____ NORTH (DEG. MIN. SEC.) Longitude _____ WEST (DEG. MIN. SEC.)

LOCATION SKETCH

NORTH
WEST EAST
SOUTH

Illustrate or Describe Distance of Well from Landmarks such as Roads, Buildings, Fences, Rivers, etc.
PLEASE BE ACCURATE & COMPLETE.

ACTIVITY (✓)

___ NEW WELL
MODIFICATION/REPAIR
___ Deepen
___ Other (Specify)
___ DESTROY (*Describe Procedures and Materials Under "GEOLOGIC LOG"*)

PLANNED USE(S) (✓)

___ MONITORING
WATER SUPPLY
___ Domestic
___ Public
___ Irrigation
___ Industrial
___ "TEST WELL"
___ CATHODIC PROTECTION
___ OTHER (Specify)

DRILLING METHOD _____ FLUID _____

WATER LEVEL & YIELD OF COMPLETED WELL

DEPTH OF STATIC WATER LEVEL _____ (Ft.) & DATE MEASURED _____
ESTIMATED YIELD* _____ (GPM) & TEST TYPE _____
TEST LENGTH _____ (Hrs.) TOTAL DRAWDOWN _____ (Ft.)
** May not be representative of a well's long-term yield.*

CASING(S)

DEPTH FROM SURFACE Ft.	to Ft.	BORE-HOLE DIA. (Inches)	TYPE (✓) BLANK	SCREEN	CON-DUCTOR	FILL PIPE	MATERIAL/GRADE	INTERNAL DIAMETER (Inches)	GAUGE OR WALL THICKNESS	SLOT SIZE IF ANY (Inches)
690	810	15"		SCREEN			PVC	8"	200	.040
810	830	15"		PERF			PVC	8"	200	.040
830	850	15"		SCREEN			PVC	8"	200	.040
850	860	15"		BLANK			PVC	8"	200	

ANNULAR MATERIAL

DEPTH FROM SURFACE Ft.	to Ft.	TYPE: CEMENT (✓)	BENTONITE (✓)	FILL (✓)	FILTER PACK* (TYPE/SIZE)

ATTACHMENTS (✓)

___ Geologic Log
___ Well Construction Diagram
___ Geophysical Log(s)
___ Soil/Water Chemical Analyses
___ Other _____

ATTACH ADDITIONAL INFORMATION, IF IT EXISTS.

CERTIFICATION STATEMENT

I, the undersigned, certify that this report is complete and accurate to the best of my knowledge and belief.

NAME _____ (PERSON, FIRM, OR CORPORATION) (TYPED OR PRINTED)
ADDRESS CITY STATE ZIP
Signed _____ WELL DRILLER/AUTHORIZED REPRESENTATIVE DATE SIGNED C-57 LICENSE NUMBER

DWR 188 REV. 7-90

IF ADDITIONAL SPACE IS NEEDED, USE NEXT CONSECUTIVELY NUMBERED FORM

ORIGINAL
File with DWR

Page 3 of 3

Owner's Well No. _____

Date Work Began _____ Ended _____

Local Permit Agency _____

Permit No. _____ Permit Date _____

STATE OF CALIFORNIA

WELL COMPLETION REPORT

Refer to Instruction Pamphlet

No. ~~469905~~

CMT 469900

DWR USE ONLY — DO NOT FILL IN

STATE WELL NO./STATION NO.

LATITUDE LONGITUDE

APN/TRS/OTHER

GEOLOGIC LOG

ORIENTATION (✓) ___ VERTICAL ___ HORIZONTAL ___ ANGLE ___ (SPECIFY)

DEPTH TO FIRST WATER _____ (Ft.) BELOW SURFACE

DEPTH FROM SURFACE Ft.	to Ft.	DESCRIPTION *Describe material, grain size, color, etc.*
755	781	Light Brown Clay
781	788	Chattering Clay & Gravel
788	792	Light Brown Clay
792	803	Shale Gravel & Sand
803	823	Light Green Clay
823	835	Shale Gravel
835	940	Light Green Clay
		MT & GM

TOTAL DEPTH OF BORING _____ (Feet)

TOTAL DEPTH OF COMPLETED WELL _____ (Feet)

WELL OWNER

Name [redacted]

Mailing Address

CITY STATE ZIP

WELL LOCATION

Address

City

County

APN Book _____ Page _____ Parcel _____

Township _____ Range _____ Section _____

Latitude _____ DEG. MIN. SEC. NORTH Longitude _____ DEG. MIN. SEC. WEST

LOCATION SKETCH

NORTH

WEST EAST

SOUTH

Illustrate or Describe Distance of Well from Landmarks such as Roads, Buildings, Fences, Rivers, etc.
PLEASE BE ACCURATE & COMPLETE.

ACTIVITY (✓)

___ NEW WELL

MODIFICATION/REPAIR

___ Deepen

___ Other (Specify)

___ DESTROY *(Describe Procedures and Materials Under "GEOLOGIC LOG")*

PLANNED USE(S) (✓)

___ MONITORING

WATER SUPPLY

___ Domestic

___ Public

___ Irrigation

___ Industrial

___ "TEST WELL"

___ CATHODIC PROTECTION

___ OTHER (Specify)

DRILLING METHOD _____ FLUID _____

WATER LEVEL & YIELD OF COMPLETED WELL

DEPTH OF STATIC WATER LEVEL _____ (Ft.) & DATE MEASURED _____

ESTIMATED YIELD* _____ (GPM) & TEST TYPE _____

TEST LENGTH _____ (Hrs.) TOTAL DRAWDOWN _____ (Ft.)

** May not be representative of a well's long-term yield.*

CASING(S)

DEPTH FROM SURFACE Ft. to Ft.	BORE-HOLE DIA. (Inches)	TYPE (✓) BLANK	SCREEN	CON-DUCTOR	FILL PIPE	MATERIAL/GRADE	INTERNAL DIAMETER (Inches)	GAUGE OR WALL THICKNESS	SLOT SIZE IF ANY (Inches)

ANNULAR MATERIAL

DEPTH FROM SURFACE Ft. to Ft.	TYPE CEMENT (✓)	BENTONITE (✓)	FILL (✓)	FILTER PACK (TYPE/SIZE)

ATTACHMENTS (✓)

___ Geologic Log

___ Well Construction Diagram

___ Geophysical Log(s)

___ Soil/Water Chemical Analyses

___ Other _____

ATTACH ADDITIONAL INFORMATION, IF IT EXISTS.

CERTIFICATION STATEMENT

I, the undersigned, certify that this report is complete and accurate to the best of my knowledge and belief.

NAME _____
(PERSON, FIRM, OR CORPORATION) (TYPED OR PRINTED)

ADDRESS CITY STATE ZIP

Signed _____ WELL DRILLER/AUTHORIZED REPRESENTATIVE DATE SIGNED _____ C-57 LICENSE NUMBER _____

DWR 188 REV. 7-90

IF ADDITIONAL SPACE IS NEEDED, USE NEXT CONSECUTIVELY NUMBERED FORM

ORIGINAL 09N32W27G
File with DWR

Page ___ of ___

Owner's Well No. ___

Date Work Began Oct. 1, 2009 Ended Oct. 5, 2009

Local Permit Agency Santa Barbara Environmental Health

Permit No. SR 0106788 Permit Date Sept 21, 2009

STATE OF CALIFORNIA

WELL COMPLETION REPORT

Refer to Instruction Pamphlet

No. 1090214

CC318

DWR USE ONLY — DO NOT FILL IN

STATE WELL NO./STATION NO.

LATITUDE LONGITUDE

APN/TRS/OTHER

GEOLOGIC LOG

ORIENTATION (✓) X VERTICAL ___ HORIZONTAL ___ ANGLE ___ (SPECIFY)

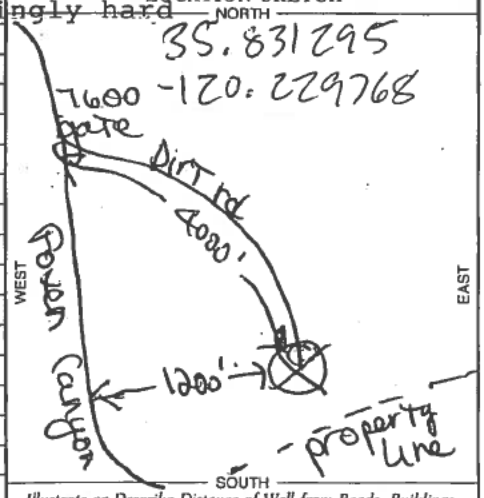
DRILLING METHOD Mud Rotary FLUID Bentinit[redacted]

DEPTH FROM SURFACE Ft.	to Ft.	DESCRIPTION *Describe material, grain size, color, etc.*
0	10	Brown clay
10	27	Brown shale/fine sand
27	42	Brown shale
42	85	Coarse shale/gravel/sand
85	110	Brown clay
110	137	Dark grey clay/gravel mix
137	140	Dark Black shale/clay mix
140	200	Dark shale/clay mix, increasingly hard

TOTAL DEPTH OF BORING 200 (Feet)

TOTAL DEPTH OF COMPLETED WELL 200 (Feet)

LOCATION SKETCH



Illustrate or Describe Distance of Well from Roads, Buildings, Fences, Rivers, etc. and attach a map. Use additional paper if necessary. ***PLEASE BE ACCURATE & COMPLETE.***

ACTIVITY (✓)

X NEW WELL

MODIFICATION/REPAIR
___ Deepen
___ Other (Specify)

___ DESTROY *(Describe Procedures and Materials Under "GEOLOGIC LOG")*

USES (✓)

WATER SUPPLY
___ Domestic ___ Public
X Irrigation ___ Industrial

MONITORING ___
TEST WELL ___
CATHODIC PROTECTION ___
HEAT EXCHANGE ___
DIRECT PUSH ___
INJECTION ___
VAPOR EXTRACTION ___
SPARGING ___
REMEDIATION ___
OTHER (SPECIFY) ___

WATER LEVEL & YIELD OF COMPLETED WELL

DEPTH TO FIRST WATER ___ (Ft.) BELOW SURFACE

DEPTH OF STATIC WATER LEVEL 116 (Ft.) & DATE MEASURED 10/2/09

ESTIMATED YIELD * 16.65 (GPM) & TEST TYPE Pump

TEST LENGTH 3 (Hrs.) TOTAL DRAWDOWN 182 (Ft.)

** May not be representative of a well's long-term yield.*

CASING (S)

DEPTH FROM SURFACE Ft.	to Ft.	BORE-HOLE DIA. (Inches)	TYPE (✓) BLANK	SCREEN	CON-DUCTOR	FILL PIPE	MATERIAL / GRADE	INTERNAL DIAMETER (Inches)	GAUGE OR WALL THICKNESS	SLOT SIZE IF ANY (Inches)
0	80	14"	X				PVC F480	8"	SDR 21	
80	200	14"		X			PVC F480	8"	SDR 21	.040

ANNULAR MATERIAL

DEPTH FROM SURFACE Ft.	to Ft.	TYPE CE-MENT (✓)	BEN-TONITE (✓)	FILL (✓)	FILTER PACK (TYPE/SIZE)
0	50	X			
50	200			X	Pea Grave

ATTACHMENTS (✓)

___ Geologic Log
___ Well Construction Diagram
___ Geophysical Log(s)
___ Soil/Water Chemical Analyses
___ Other ___

ATTACH ADDITIONAL INFORMATION, IF IT EXISTS.

[redacted]

10/19/09

10/19/09

CONFIDENTIAL WATER CODE

DWR 188 REV. 05-03

IF ADDITIONAL SPACE IS NEEDED, USE NEXT CONSECUTIVELY NUMBERED FORM

OSP 03 78836

√ 9N 32W 27K CC 295

ORIGINAL
File with DWR

Page 1 of 1

STATE OF CALIFORNIA
WELL COMPLETION REPORT
Refer to Instruction Pamphlet

No. 0907671

Owner's Well No. 1

Date Work Began 9/20/05, Ended 9/26/05

Local Permit Agency Santa Barbara Co.Environmental Health

Permit No. 0103926 Permit Date 8/9/05

DWR USE ONLY — DO NOT FILL IN
STATE WELL NO./STATION NO.
LATITUDE LONGITUDE
APN/TRS/OTHER

GEOLOGIC LOG

ORIENTATION (✓) X VERTICAL ___ HORIZONTAL ___ ANGLE ___ (SPECIFY)

DRILLING METHOD Mud Rotary FLUID Bentonite

DEPTH FROM SURFACE Ft. to Ft.	DESCRIPTION *Describe material, grain size, color, etc.*
	See Attached Formation Log

TOTAL DEPTH OF BORING 140 (Feet)

TOTAL DEPTH OF COMPLETED WELL 130 (Feet)

[redacted]

WELL LOCATION

Address 7200 Foxen Canyon Road

City Santa Maria

County Santa Barbara

APN Book 133 Page 070 Parcel 031

Township 09N Range 32W Section 27

Lat ___ N (DEG. MIN. SEC.) Long ___ W (DEG. MIN. SEC.)

LOCATION SKETCH

NORTH

34.625014

See Attached Map

-120.232213

WEST EAST

SOUTH

Illustrate or Describe Distance of Well from Roads, Buildings, Fences, Rivers, etc. and attach a map. Use additional paper if necessary. ***PLEASE BE ACCURATE & COMPLETE.***

ACTIVITY (✓)

X NEW WELL

MODIFICATION/REPAIR
___ Deepen
___ Other (Specify)

___ DESTROY *(Describe Procedures and Materials Under "GEOLOGIC LOG")*

USES (✓)

WATER SUPPLY
X Domestic ___ Public
___ Irrigation ___ Industrial

MONITORING ___
TEST WELL ___
CATHODIC PROTECTION ___
HEAT EXCHANGE ___
DIRECT PUSH ___
INJECTION ___
VAPOR EXTRACTION ___
SPARGING ___
REMEDIATION ___
OTHER (SPECIFY) ___

WATER LEVEL & YIELD OF COMPLETED WELL

DEPTH TO FIRST WATER 36 (Ft.) BELOW SURFACE

DEPTH OF STATIC WATER LEVEL 36 (Ft.) & DATE MEASURED ___

ESTIMATED YIELD * 4 (GPM) & TEST TYPE Continuous

TEST LENGTH 72 (Hrs.) TOTAL DRAWDOWN 73 (Ft.)

** May not be representative of a well's long-term yield.*

CASING (S)

DEPTH FROM SURFACE Ft. to Ft.	BORE-HOLE DIA. (Inches)	TYPE (✓) BLANK	SCREEN	CON-DUCTOR	FILL PIPE	MATERIAL / GRADE	INTERNAL DIAMETER (Inches)	GAUGE OR WALL THICKNESS	SLOT SIZE IF ANY (Inches)
0 to 80	12¼	x				PVC	6	.411	
80 to 120	12¼		x			PVC	6	.411	.040
120 to 130	12¼	x				PVC	6	.411	

ANNULAR MATERIAL

DEPTH FROM SURFACE Ft. to Ft.	TYPE CEMENT (✓)	BENTONITE (✓)	FILL (✓)	FILTER PACK (TYPE/SIZE)
0 to 50	x			6-sack
50 to 130			x	Lapis #3

ATTACHMENTS (✓)

___ Geologic Log
___ Well Construction Diagram
___ Geophysical Log(s)
___ Soil/Water Chemical Analyses
___ Other ___

ATTACH ADDITIONAL INFORMATION, IF IT EXISTS.

[redacted]

0907671

Floyd V. Wells, Inc. Santa Maria, CA

Formation Log

Owner: Richard Dore

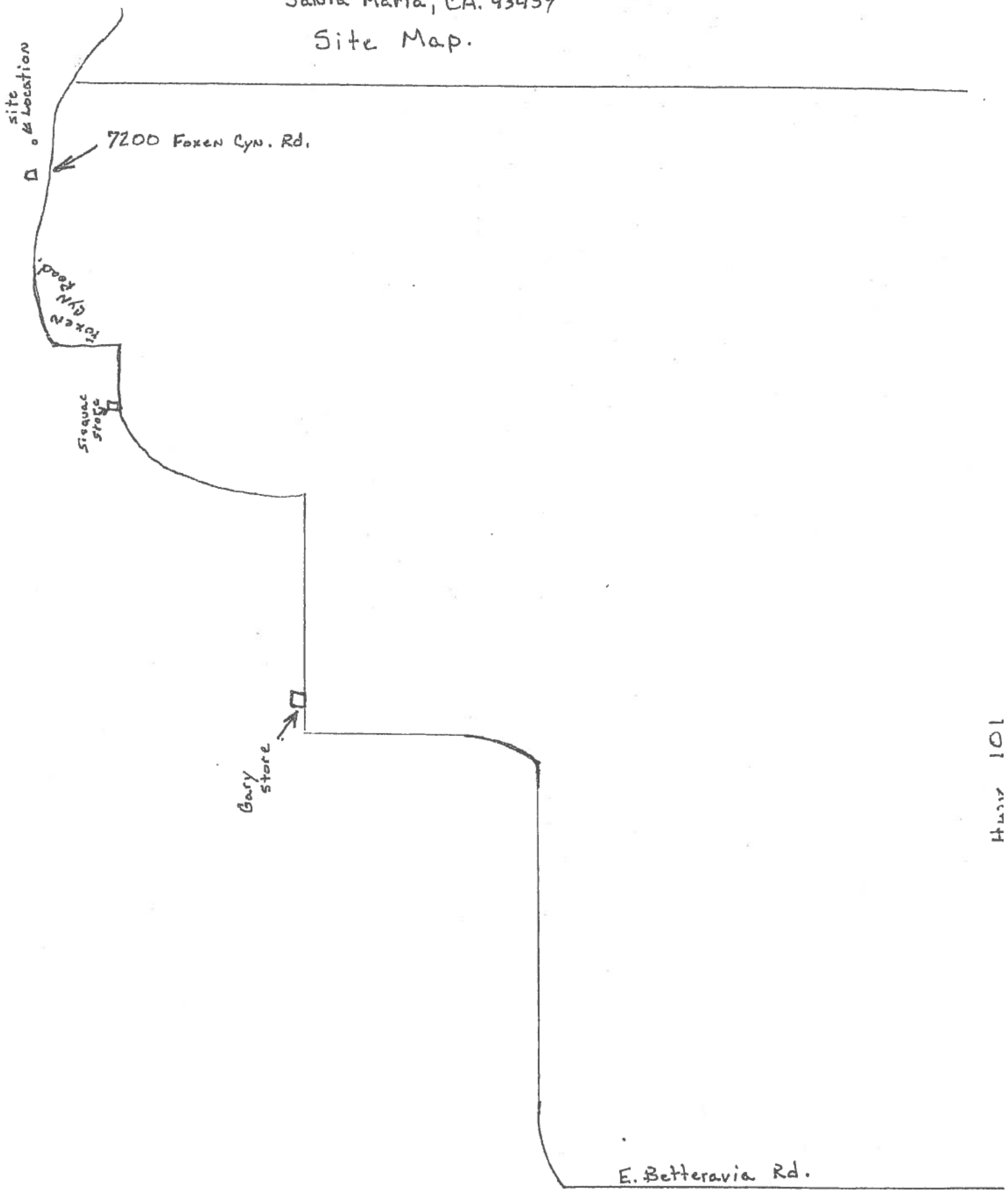
Well No.: 1 Date: 6/13/05

Start Footage	*End Footage*	*Formation Description*
0	10	Brown Clay, Coarse Sand
10	20	Small Gravel, Some Brown Clay
20	30	Brown Clay, Coarse Sand, Small Gravel
30	80	Grayish Clay, Some Gravel, Coarse Sand, Fine Sand
80	85	Gray Clay, Fine Sand,
85	88	Small Gravel, Some Gray Clay, Fine Sand
88	130	Sandstone, Blue Clay
130	165	Gray Clay, Some Coarse Sand, Gravel
165	195	Cement Sand, Some Gravel, Fine Sand
195	360	Gray Clay, Some Coarse Sand, Fine Sand
360	380	Redish Brown Clay

Richard Dore
7200 Foxen Canyon Rd.
Santa Maria, CA. 93454

0907671

Site Map.



9N 32W 28

9N 32W 28 ✓ guess
CC176

ORIGINAL

File with DWR

[redacted] of Intent No.

Local Permit No. or Date

STATE OF CALIFORNIA
THE RESOURCES AGENCY
DEPARTMENT OF WATER RESOURCES

WATER WELL DRILLERS REPORT

Do not fill in
No. 159021

State Well No.
Other Well No.

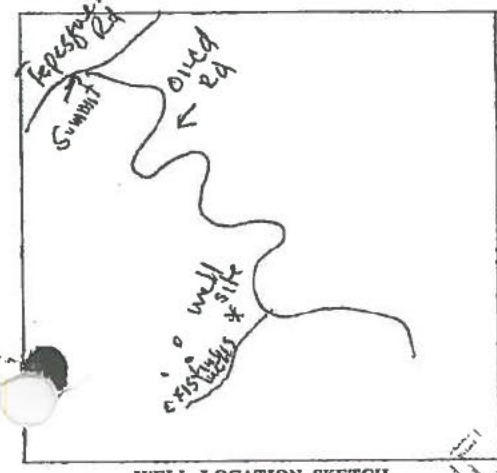
(2) LOCATION OF WELL (See instructions):

County Santa Barbara Owner's Well Number

Well address if different from above

Township 9N Range 32W Section 28

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



WELL LOCATION SKETCH

(3) TYPE OF WORK:

New Well ☒ Deepening ☐
Reconstruction ☐
Reconditioning ☐
Horizontal Well ☐
Destruction ☐ (Describe destruction materials and procedures in Item 12)

(4) PROPOSED USE:

Domestic ☒
Irrigation ☐
Industrial ☐
Test Well ☐
Stock ☐
Municipal ☐
Other ☐

(5) EQUIPMENT:

Rotary ☒ Reverse ☐
Cable ☐ Air ☒
Other ☐ Bucket ☐

(6) GRAVEL PACK:

Yes ☒ No ☐ Size Sand
Diameter of bore 10"
Packed from 22 to 275 ft.

(7) CASING INSTALLED:

Steel ☐ Plastic ☒ Concrete ☐

From ft.	To ft.	Dia. in.	Gage of Wall
0	275	5 5/8	160

(8) PERFORATIONS:

Type of perforation or size of screen Slotted

From ft.	To ft.	Slot size
55	275	.040

(9) WELL SEAL:

Was surface sanitary seal provided? Yes ☒ No ☐ If yes, to depth 22 ft.
Were strata sealed against pollution? Yes ☐ No ☒ Interval ft.
Method of sealing Cement

(10) WATER LEVELS:

Depth of first water, if known 92 ft.
Standing level after well completion 70 ft.

(11) WELL TESTS:

Was well test made? Yes ☒ No ☐ If yes, by whom? F&T
Type of test Pump ☐ Bailer ☐ Air lift ☒
Depth to water at start of test ft. At end of test ft
[redacted]arge 17 gal/min after hours Water temperature
[redacted]hemical analysis made? Yes ☐ No ☒ If yes, by whom?
[redacted] electric log made? Yes ☐ No ☒ If yes, attach copy to this report

(12) WELL LOG:

Total depth 295 ft. Depth of completed well 275 ft.

from ft.	to ft.	Formation (Describe by color, character, size or material)
0	3	Top Soil
3	18	Brown Clay
18	42	Brown Shale
42	98	Blue Clay
98	111	Dark Brown Shale
111	117	Blue Clay
117	142	Blue Shale
142	188	Blue Clay
188	295	Brown Shale

Work started 12/1 19 86 Completed 12/4 19 86

WELL DRILLER'S STATEMENT:

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

SIGNED [signature] (Well Driller)

NAME Filipponi & Thompson Drilling Co.
(Person, firm, or corporation) (Typed or printed)

Address P.O. Box 845
City Atascadero, CA 93423 Zip

License No. 301498 Date of this report 12/8/86

DWR 188 (REV. 7-76) IF ADDITIONAL SPACE IS NEEDED, USE NEXT CONSECUTIVELY NUMBERED FORM

9N-32W 28-K CE177

ORIGINAL
File with DWR
Page 1 of 1

KEY PUNCHED

STATE OF CALIFORNIA
WELL COMPLETION REPORT
Refer to Instruction Pamphlet

No. 511158

Owner's Well No. _____
Date Work Began 07/01/98, Ended 07/06/98
Local Permit Agency Santa Barbara
Permit No. 673 Permit Date 06/28/98

DWR USE ONLY — DO NOT FILL IN
STATE WELL NO./STATION NO.
LATITUDE LONGITUDE
APN/TRS/OTHER

GEOLOGIC LOG

ORIENTATION (✓) ___ VERTICAL ___ HORIZONTAL ___ ANGLE ___ (SPECIFY)
DEPTH TO FIRST WATER _____ (Ft.) BELOW SURFACE

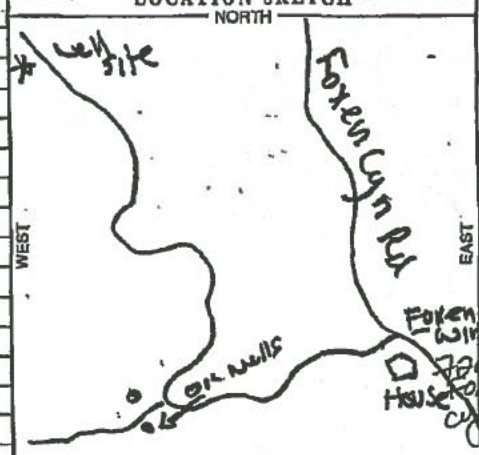
DEPTH FROM SURFACE Ft.	to Ft.	DESCRIPTION *Describe material, grain size, color, etc.*
0	5	SAND & GRAVEL
5	18	SAND & GRAVEL
18	21	BROWN CLAY & GRAVEL MIX
21	39	SAND & GRAVEL
39	40	BROWN CLAY
40	47	SAND & GRAVEL
47	49	BROWN CLAY
49	72	SAND & GRAVEL
72	84	BROWN CLAY
84	87	SAND & GRAVEL
87	96	BROWN CLAY
96	143	SAND & GRAVEL
143	149	BROWN CLAY
149	164	GREY SAND
164	169	BROWN CLAY
169	193	BROWN SAND
193	223	BLUE CLAY
223	252	SAND & GRAVEL
252	260	BLUE CLAY
260	303	BLUE SAND & GRAVEL
303	312	CEMENTED SAND
312	384	SILTY SAND & SEASHELLS
384	420	SAND & SILT LAYERS
420	500	GREY SILT

AIR LIFT TEST IS ONLY APPROXIMATE AND MAY BE INACCURATE. A TEST PUMP IS RECOMMENDED FOR AN ACCURATE ACCOUNT.

TOTAL DEPTH OF BORING 500 (Feet)
TOTAL DEPTH OF COMPLETED WELL 430 (Feet) MT

WELL OWNER
Name
Mailing Add
CITY STATE ZIP

WELL LOCATION
Address Foxen Canyon Road
City Sisquoc
County Santa Barbara
APN Book 101 Page 050 Parcel 016
Township 9N Range 32W Section 28
Latitude ° ' " NORTH (DEG. MIN. SEC.) Longitude ° ' " WEST (DEG. MIN. SEC.)

LOCATION SKETCH


Illustrate or Describe Distance of Well from Landmarks such as Roads, Buildings, Fences, Rivers, etc.
PLEASE BE ACCURATE & COMPLETE.

ACTIVITY (✓)
X NEW WELL
MODIFICATION/REPAIR
___ Deepen
___ Other (Specify)
___ DESTROY (Describe Procedures and Materials Under "GEOLOGIC LOG")

PLANNED USE(S) (✓)
___ MONITORING
WATER SUPPLY
X Domestic
___ Public
___ Irrigation
___ Industrial
___ "TEST WELL"
___ CATHODIC PROTECTION
___ OTHER (Specify)

DRILLING METHOD _____ FLUID Bentonite

WATER LEVEL & YIELD OF COMPLETED WELL
DEPTH OF STATIC WATER LEVEL 250+- (Ft.) & DATE MEASURED 07/06/98
ESTIMATED YIELD* _____ (GPM) & TEST TYPE Air Lift
TEST LENGTH 4 (Hrs.) TOTAL DRAWDOWN _____ (Ft.)
* *May not be representative of a well's long-term yield.*

CASING(S)

DEPTH FROM SURFACE Ft.	to Ft.	BORE-HOLE DIA. (Inches)	TYPE (✓) BLANK	SCREEN	CONDUCTOR	FILL PIPE	MATERIAL/GRADE	INTERNAL DIAMETER (Inches)	GAUGE OR WALL THICKNESS	SLOT SIZE IF ANY (Inches)
0	320	12¼	Blank				PVC	6	SDR 21	
320	420	12¼		Screen			PVC	6	SDR 21	.040
420	430	12¼	Blank				PVC	6	SDR 21	

ANNULAR MATERIAL

DEPTH FROM SURFACE Ft.	to Ft.	TYPE: CEMENT (✓)	BENTONITE (✓)	FILL (✓)	FILTER PACK (TYPE/SIZE)
0	63	X			
63	430				Monterey Sand

ATTACHMENTS (✓)
___ Geologic Log
___ Well Construction Diagram
___ Geophysical Log(s)
___ Soil/Water Chemical Analyses
___ Other _____
ATTACH ADDITIONAL INFORMATION, IF IT EXISTS.

CERTIFICATION STATEMENT
I, the undersigned, certify that this report is complete and accurate to the best of my knowledge and belief.
NAME Filipponi & Thompson Drilling, Inc (PERSON, FIRM, OR CORPORATION) (TYPED OR PRINTED)
ADDRESS P.O. Box 845 CITY Atascadero STATE CA ZIP 93423
Signed [signature] WELL OWNER/AUTHORIZED REPRESENTATIVE DATE SIGNED 7/20/98 C-57 LICENSE NUMBER 432680

DWR 188 REV. 7-90 IF ADDITIONAL SPACE IS NEEDED, USE NEXT CONSECUTIVELY NUMBERED FORM

9N 32W 29

APN places well diff spot than address → 29G DK

ORIGINAL
File with DWR

STATE OF CALIFORNIA
WELL COMPLETION REPORT
Refer to Instruction Pamphlet

No. 0905313

CC 178

Page ___ of ___
Owner's Well No. 1
Date Work Began 4-11-05, Ended 5-10-05
Local Permit Agency Santa Barbara Co
Permit No. SR-103688 Permit Date 3-25-05

DWR USE ONLY — DO NOT FILL IN
STATE WELL NO./STATION NO.
LATITUDE LONGITUDE
APN/TRS/OTHER

GEOLOGIC LOG

ORIENTATION (✓) ___ VERTICAL X HORIZONTAL ___ ANGLE ___ (SPECIFY)
DRILLING METHOD Rotary FLUID Mud

DEPTH FROM SURFACE Ft.	to Ft.	DESCRIPTION *Describe material, grain size, color, etc.*
0	8	Hard Sand
8	92	Sand & Gravel Fine
92	102	Brown Clay
102	215	Sandy Clay
215	220	Brown Clay
220	230	Brown Sand
230	234	White Clay
234	276	Sand & Small Gravel
276	282	Brown Clay
282	308	Brown Sand & Gravel
308	360	Brown Sandy Clay
360	395	Blue Sandy Clay & Sea Shells
395	580	Blue Sandy Silt

TOTAL DEPTH OF BORING 580 (Feet)
TOTAL DEPTH OF COMPLETED WELL 550 (Feet)

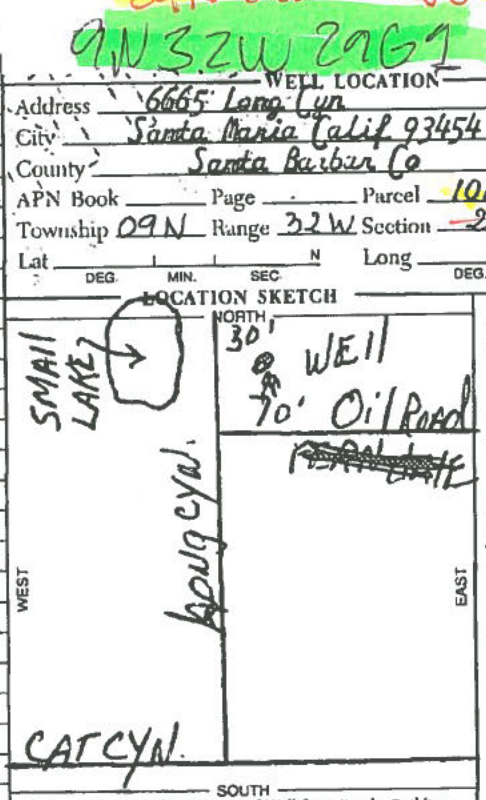
WELL OWNER

09N 32W - ~~29R~~
9N 32W 29G1 33D1?

WELL LOCATION

Address 6665 Long Cyn
City Santa Maria Calif 93454
County Santa Barbar Co
APN Book ___ Page ___ Parcel 101-070-048
Township 09N Range 32W Section ~~29~~
Lat ___ N DEG. MIN. SEC. Long ___ W DEG. MIN. SEC.

LOCATION SKETCH



Illustrate or Describe Distance of Well from Roads, Buildings, Fences, Rivers, etc. and attach a map. Use additional paper if necessary. **PLEASE BE ACCURATE & COMPLETE.**

ACTIVITY (✓)

X NEW WELL
MODIFICATION/REPAIR
___ Deepen
___ Other (Specify)
___ DESTROY (*Describe Procedures and Materials Under "GEOLOGIC LOG"*)

USES (✓)
WATER SUPPLY
X Domestic ___ Public
___ Irrigation ___ Industrial
MONITORING ___
TEST WELL ___
CATHODIC PROTECTION ___
HEAT EXCHANGE ___
DIRECT PUSH ___
INJECTION ___
VAPOR EXTRACTION ___
SPARGING ___
REMEDIATION ___
OTHER (SPECIFY) ___

WATER LEVEL & YIELD OF COMPLETED WELL

DEPTH TO FIRST WATER ___ (Ft.) BELOW SURFACE
DEPTH OF STATIC WATER LEVEL 285 (Ft.) & DATE MEASURED 5-1-05
ESTIMATED YIELD * 45 (GPM) & TEST TYPE Pump
TEST LENGTH 12 (Hrs.) TOTAL DRAWDOWN 85 (Ft.)
** May not be representative of a well's long-term yield.*

CASING (S)

DEPTH FROM SURFACE Ft.	to Ft.	BORE-HOLE DIA. (Inches)	TYPE (✓) BLANK	SCREEN	CON-DUCTOR	FILL PIPE	MATERIAL / GRADE	INTERNAL DIAMETER (Inches)	GAUGE OR WALL THICKNESS	SLOT SIZE IF ANY (Inches)
0	350	11	x				PVC	5	SDR-21	
350	550	11		X			PVC	5	SDR-21	040

ANNULAR MATERIAL

DEPTH FROM SURFACE Ft.	to Ft.	TYPE: CEMENT (✓)	BENTONITE (✓)	FILL (✓)	FILTER PACK (TYPE/SIZE)
0	21	X			
					#3 Monterey

ATTACHMENTS (✓)

___ Geologic Log
___ Well Construction Diagram
___ Geophysical Log(s)
___ Soil/Water Chemical Analyses
___ Other ___

ATTACH ADDITIONAL INFORMATION, IF IT EXISTS.

CERTIFICATION STATEMENT

I, the undersigned, certify that this report is complete and accurate to the best of my knowledge and belief.

NAME Ron Taylor Drilling (PERSON, FIRM, OR CORPORATION) (TYPED OR PRINTED)
ADDRESS 2801 Mahoney Rd CITY Santa Maria STATE Calif ZIP 93455
Signed [signature] C-57 LICENSED WATER WELL CONTRACTOR DATE SIGNED 6-5-05 C-57 LICENSE NUMBER 523-858

DWR 185 REV. 05-03 IF ADDITIONAL SPACE IS NEEDED, USE NEXT CONSECUTIVELY NUMBERED FORM OSP 03 78836

1N 32W 29 G2 101-070-058 CC179

Permit No. 8970

WELL PERMIT APPLICATION

TO: Environmental Health Division
Santa Barbara County Health Care Services

Date 9/8/91

Name of Well Own (b) (6) [redacted]

Mailing Address

Well Site Location

Assessor's Parcel No. 101-070-58 Street Address 6608 Lang Canyon Rd.

Township 9 North Range 32 W. Section SW 1/4 of NE 1/4 Rancho

Name of Well Driller Alexanders Bros. Inc.

Company Name 200 La Salle Canyon Rd.

Business Address Lompoc, Ca. 93436 Date of Work

Contractor's License No. 350699 Start / / Finish / /

OTHER WATER SOURCE: Public ☐ Private ☒ None ☐

Permit Type (Check)		Well Use (Check)		Drilling Method (Check)	
Construction	☒	Domestic	☒	Rotary	☒
Repair/Modification	☐	Agriculture	☒	Cable	☐
Destruction	☐	Cathodic	☐	Other	☐
Inactivation	☐	Test	☐		

Proposed Depth 400 ft.

Well Bore Diam 10 in.

Casing Information

Type: Steel ☐ PVC ☒ Other ☐

Wall/Gage Class 200 in.

Diameter 6 in.

Annular Seal Depth 20 ft.

Sealing Material (Check)

Neat Cement ☐ Clay ☐

Cement Grout ☒ Concrete ☒

Additional Work Description:

For Department Use Only

Application Disposition:

Approved ☒

Denied ☐

Comments

I hereby agree to comply with all regulations of the County of Santa Barbara pertaining to well construction, repair, modification, destruction and inactivation. The property owner, well driller, or agent will furnish County Health Care Services a complete well log upon completion of well construction.

Signed Jim Beard Applicant 9/8/91

$450 Fee paid on 12/09/91

Receipt No. X 1125318

Name

Date 12-13-91

S.B. ☐ Sol. ☐

S.M. ☒ Lom ☒

WHEN SIGNED BY HEALTH CARE SERVICES, THIS APPLICATION IS A PERMIT. HEALTH OFFICER SHALL BE NOTIFIED PRIOR TO ALL SEALING OPERATIONS. NOTE: PERMIT EXPIRES ONE YEAR FROM DATE ISSUED.

NVS 12/18/91

H-96 Rev. 6-84

WELL PERMIT APPLICATION

Plot Plan (¼" = 20')

Permit No. 8970

APN 101-070-58

Indicate below the exact location of the proposed well with respect to the following items: Property lines, sewer lines and sewage disposal systems, animal enclosures, watercourses, flood plain, drainage pattern, existing wells, access roads, easements, and well site elevation. Include dimensions.

See Attached

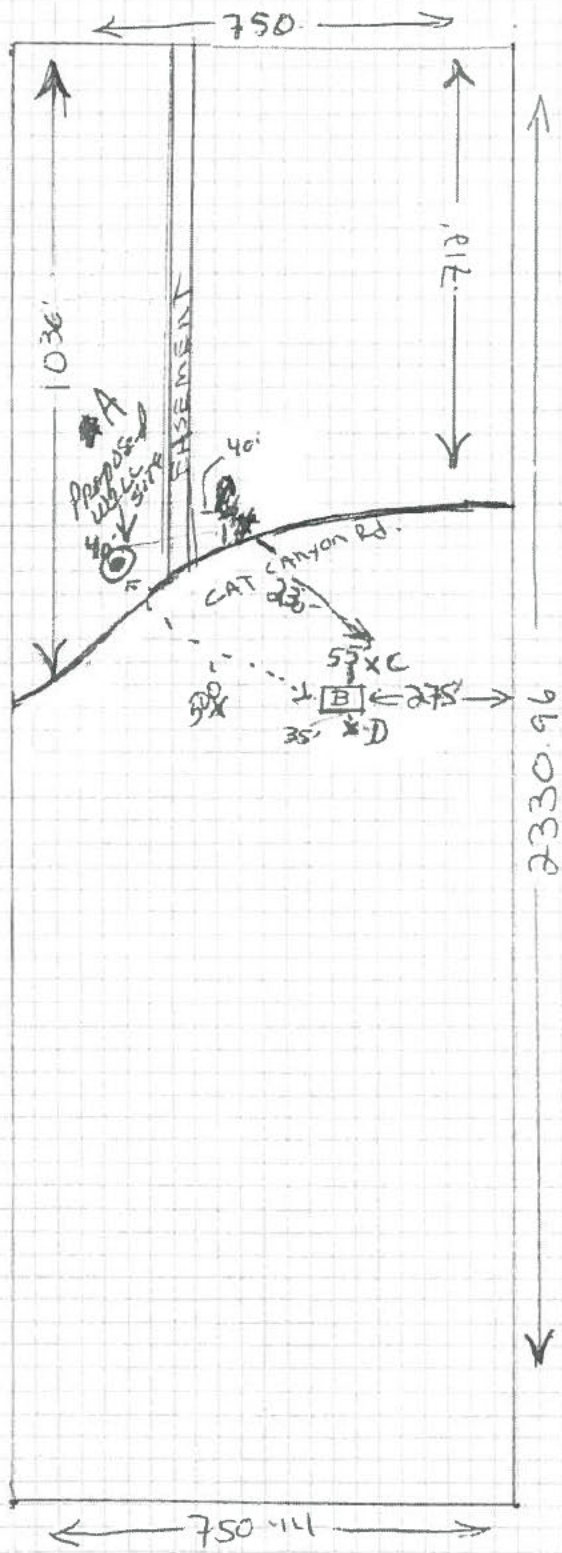
Permit # 8410
APN # 101-070-58

A- proposed well & site water

B- House

C- Septic Tank
50' From septic to House
130' From septic to proposed well site

D- existing well water



6 miles East of Hwy 101 & Cat Cyn Rd

1" = 290' Approx.

Permit No. 8970
Page 3 of 3 pages
APN 101-070-58

ENVIRONMENTAL HEALTH DIVISION
SANTA BARBARA COUNTY HEALTH CARE SERVICES
WELL PERMIT FIELD INVESTIGATION RECORD

Well Permit Application Received: Date 12/9/91

Site Investigation By H. Ruiz Date 12/13/91

Findings: (Check applicable boxes and give clearance)

- ☐ Overhead Power Lines _____
- ☐ Sewer Lines _____
- ☐ Leach Field _____
- ☐ Cesspool/Drywell _____
- ☐ Animal Enclosure _____
- ☐ Creek or Watercourse _____
- ☐ Petroleum Tank or Pipeline _____
- ☐ Other _____

No usable sources of contamination to well site — APN# checked ok - no land use conditions

Application Reviewed and Approved: By H. Ruiz Date 12/13/91

Work Investigation Record

Date / /

Well Site #: _____

Casing Information

Type: Steel ☐ PVC ☐ Other ☐ _____

Class/Gage/NSF: _____

ASTM#: _____

Diameter: _____ Total Depth: _____

Casing Schedule

0' - ____' = _____
____ - ____ = _____
____ - ____ = _____
____ - ____ = _____
____ - ____ = _____
____ - ____ = _____
____ - ____ = _____

Borehole

Total Depth of Well: _____

Annular Seal Depth: _____

Well Bore Diameter: _____

Sealing Material: _____

Amount: _____

Method of Pour: _____

Use of Tremie: _____

Driller(s): _____

Comments: _____

Final Inspection and Approval/Denial: By _____ Date / /

Notice of Work Acceptance/Rejection Sent to Well owner On / /

W-320P Rev. 12/89

9N/32W-29J
CC180

ORIGINAL
File with DWR MAY 31 1975

STATE OF CALIFORNIA
THE RESOURCES AGENCY
DEPARTMENT OF WATER RESOURCES

WATER WELL DRILLERS REPORT

Do Not Fill In

№ 106994

State Well No. 9N/32W

Other Well No.

34 49' 34.90 120 15' 43.53"

(1) WELL LOG:

Total depth 602 ft. Depth of completed well 580 ft.

Formation: Describe by color, character, size of material, and structure

ft. to ft.

See attached log

(2) LOCATION OF WELL:

County SANTA BARBARA Owner's number, if any ~~#24~~ #4

Township, Range, and Section T-9-N, R-32-W, Sec 29

Distance from cities, roads, railroads, etc. 36' South of well drilled and ababndoned.
600' West and 2100' North from the Southeast corner of Sec. 29.

(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: SINGLE ☒ DOUBLE ☐ OTHER:

If gravel packed

From ft.	To ft.	Diam.	Gage or Wall	Diameter of Bore	From ft.	To ft.
0	580	6 5/8	.250	15"	50	580
			&.1875			

Shoe or well ring: Size of gravel:

Describe joint Butt welded

(7) PERFORATIONS OR SCREEN:

Type of perforation or name of screen

From ft.	To ft.	Perf. per row	Rows per ft.	Size in. x in.
250	280	6	2	.125 X 2.5
430	580			

CONFIDENTIAL - NOT FOR PUBLIC RELEASE

(8) CONSTRUCTION:

Was a surface sanitary seal provided? Yes ☒ No ☐ To what depth 50 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 Cement

(9) WATER LEVELS:

Depth at which water was first found, if known 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: 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 2-17-75 19 , Completed 2-28-75 19

WELL DRILLER'S STATEMENT:

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

NAME FLOYD V. WELLS, INC.
(Person, firm, or corporation) (Typed or printed)

Address P.O. BOX 1007, SANTA MARIA, CA 93454

[SIGNED] [signature] (Well Driller)

License No. C57-229570 Dated MARCH 17, 1975, 19

SKETCH LOCATION OF WELL ON REVERSE SIDE

DWR 188 (REV. 9-68)

67138-750 6-72 30M TRIP OSP

106994

MARIA, CALIFORNIA

FLOYD V. WELLS, INC.

GOLETA, CALIFORNIA

MAY 31 1975

WATER WELL DRILLING LOG

Name): _____ RANCH (Name): _____

Well #: 4 Rotary No. 5 Rig

Location: 36' South of well drilled and abandoned. 600' West and 2100' North from the South-East corner of Section 29, Township 9-N, Range 32 West San Bernardino Base and Meridian

Surface Pipe: Top 50' cemented Size: _____ Depth: _____ Gauge: _____

Well Bore Dia.: 15"

Depth of Casing Set: 580'

Casing Size: 6 5/8" Gauge: 3/16" and .250 Type: Steel

Perforations Size: 1/8" Type: Horizontal Slots Number: 6-Rows

Perforation Location from Ground Level: 250' to 280' - 430' to 580' FROM _____ TO _____

CONFIDENTIAL - NOT FOR PUBLIC RELEASE

Gravel Pack Type: 1/4 X 1/8 Size 1/4 X 1/8 Yards: 38.54 Tons

Well Completed: February 28, 1975

FORMATION LOG

FROM	TO	DESCRIPTION
0'	3'	Top soil
3'	76'	Coarse sand w/gravel and rocks
76'	83'	Brown sandy clay
83'	197'	Coarse sand and gravel
197'	281'	Coarse sand & gravel w/sticky clay
281'	302'	Fine and coarse sand

MARIA, CALIFORNIA

FLOYD V. WELLS, INC.

106994
GOLETA, CALIFORNIA

FORMATION LOG

Well No. 4

FROM	TO	DESCRIPTION
302'	309'	Fine and coarse sand w/pink clay
309'	323'	Light brown sandy clay
323'	366'	Fine and coarse sand
366'	440'	Fine and coarse sand
440'	475'	Gray sandstone and shale
475'	602'	Gray sandstone and shale w/fine sandy silt
XXXX		clay in thin strips

Production Test:

Standing Water Level:

G.P.M.: Pumping Level:

Customer furnished 524 feet of casing. Contractor furnished 56 feet of casing

Remarks:

9N 32W 29R1

101-050-022 CC181

ORIGINAL
File with DWR

STATE OF CALIFORNIA

WELL COMPLETION REPORT

Refer to Instruction Pamphlet

No. E031011

DWR USE ONLY — DO NOT FILL IN
STATE WELL NO / STATION NO
LATITUDE LONGITUDE
APN/TRS/OTHER

Owner's Well No. F&T #1

Date Work Began 10/4/2005, Ended 10/7/2005

Local Permit Agency Santa Barbara County

Permit No. 0104011 Permit Date 9/22/2005

GEOLOGIC LOG

ORIENTATION (✓) ✓ VERTICAL — HORIZONTAL — ANGLE — (SPECIFY)

DRILLING METHOD ROTARY FLUID Bentonite

DEPTH FROM SURFACE Ft.	to Ft.	DESCRIPTION *Describe material, grain, size, color, etc.*
0	3	TOP SOIL
3	63	SAND & GRAVEL
63	75	BROWN SAND
75	300	SAND & GRAVEL
300	305	SANDY GREEN CLAY
305	370	LT. BROWN SAND
370	380	BLUE CLAY
380	470	LT. BROWN SAND & GRAVEL
470	480	GREY CLAY
480	525	LT. BROWN SAND & GRAVEL
525	590	BLUE SAND & SHELLS
590	640	GREY SILTSTONE

Air Lift Test is only approximate. A Test Pump is recommended for an accurate account. (WP)

TOTAL DEPTH OF BORING 640 (Feet)

TOTAL DEPTH OF COMPLETED WELL 550 (Feet)

WELL OWNER

Name Michael Brand / Clay Properties

Mailing Address P.O. Box 527

Los Alamos CA 93440

CITY STATE ZIP

WELL LOCATION

Address 7000 Long Canyon Road

City Los Alamos CA

County Santa Barbara

APN Book 101 Page 050 Parcel 022

Township — Range — Section —

Latitude 34 49 27.7 N (DEG MIN. SEC) 120 15 42.2 W (DEG MIN SEC)

LOCATION SKETCH

NORTH

WEST EAST

SOUTH

Illustrate or Describe Distance of Well from Roads, Buildings, Fences, Rivers, etc. and attach a map. Use additional paper if necessary. **PLEASE BE ACCURATE & COMPLETE.**

ACTIVITY (✓)

✓ NEW WELL

MODIFICATION/REPAIR
— Deepen
— Other (Specify)

— DESTROY (Describe Procedures and Materials Under "GEOLOGIC LOG")

PLANNED USES (✓)

WATER SUPPLY
✓ Domestic — Public
— Irrigation — Industrial

MONITORING
TEST WELL
CATHODIC PROTECTION
HEAT EXCHANGE
DIRECT PUSH
INJECTION
VAPOR EXTRACTION
SPARGING
REMEDIATION
OTHER (SPECIFY)

WATER LEVEL & YIELD OF COMPLETED WELL

DEPTH TO FIRST WATER — (Ft) BELOW SURFACE 1

DEPTH OF STATIC WATER LEVEL 500 (Ft) & DATE MEASURED 10/7/2005

ESTIMATED YIELD 1 (GPM) & TEST TYPE Air Lift

TEST LENGTH 4 (Hrs) TOTAL DRAWDOWN — (Ft)

May not be representative of a well's long-term yield.

CASING (S)

DEPTH FROM SURFACE Ft.	to Ft	BORE-HOLE DIA. (Inches)	TYPE (✓) BLANK	SCREEN	CON-DUCTOR	FILL PIPE	MATERIAL / GRADE	INTERNAL DIAMETER (Inches)	GAUGE OR WALL THICKNESS	SLOT SIZE IF ANY (Inches)
0	450	12 1/4	✓				F-480 PVC	6	SDR 21	
450	510	12 1/4		✓			F-480 PVC	6	SDR 21	.032
510	550	12 1/4	Perf				F-480 PVC	6	SDR 21	.040

ANNULAR MATERIAL

DEPTH FROM SURFACE Ft.	to Ft	TYPE CEMENT (✓)	BENTONITE (✓)	FILL (✓)	FILTER PACK (TYPE/SIZE)
0	45	✓			
45	550			✓	Monterey Mix

ATTACHMENTS (✓)

— Geologic Log
— Well Construction Diagram
— Geophysical Log(s)
— Soil/Water Chemical Analysis
— Other

ATTACH ADDITIONAL INFORMATION, IF IT EXISTS.

CERTIFICATION STATEMENT

I, the undersigned, certify that this report is complete and accurate to the best of my knowledge and belief

NAME FILIPPONI & THOMPSON DRILLING
(PERSON, FIRM, OR CORPORATION) (TYPED OR PRINTED)

ADDRESS P.O. BOX 845 ATASCADERO CA 93423
CITY STATE ZIP

Signed [signature] 10/14/05 432680
WELL DRILLER/AUTHORIZED REPRESENTATIVE DATE SIGNED C-57 LICENSE NUMBER

DWR 188 REV 11-97

IF ADDITIONAL SPACE IS NEEDED, USE NEXT CONSECUTIVELY NUMBERED FORM