S20104011

WELL PERMIT PLOT PLAN

W: 20° 15' 42.2"

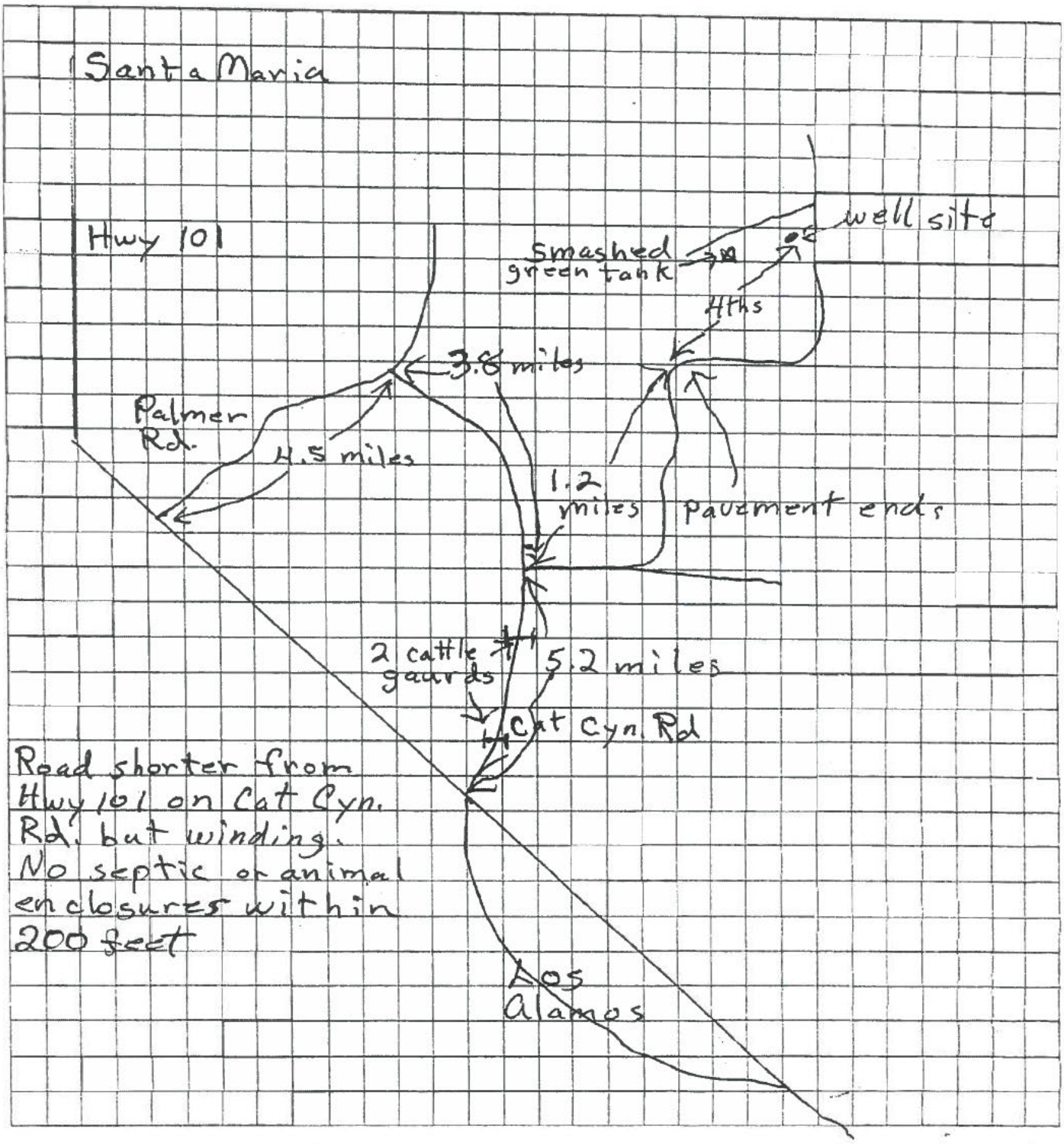
SAN LUIS OBISPO COUNTY ENVIRONMENTAL HEALTH SERVICES
2156 Sierra Way
San Luis Obispo, California 93401
Telephone: 805-781-5544

Mike Brand

7000 Long Cyn

SCALE: ¼" = 25"

INDICATE BELOW THE **EXACT LOCATION** OF PROPOSED WELL WITH RESPECT TO THE FOLLOWING ITEMS: PROPERTY LINES, WATER BODIES OR WATER COURSES, DRAINAGE PATTERN, ROADS, EXISTING WELLS, SEWERS AND PRIVATE SEWAGE DISPOSAL SYSTEMS AND ANY OTHER CONCENTRATED SOURCES OF POLLUTION. **INCLUDE DIMENSIONS.** ALL PROPOSED WELL SITES SHALL BE DESIGNATED WITH A FLAGGED SURVEYOR'S STAKE LABELED "WELL SITE." DRILLING SHALL NOT COMMENCE UNTIL THIS APPLICATION IS APPROVED.



Santa Barbara County
PUBLIC Health
DEPARTMENT

Environmental Health Services

225 Camino Del Remedio • Santa Barbara, CA 93110
805/681-4900 • FAX 805/681-4901

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

Elliot Schulman, MD, MPH *Director / Health Officer*
Richard Merrifield, REHS *Director of Environmental Health*

October 10, 2005

Mr. Mike Brand c/o
Clay Properties, LLC
PO Box 527
Los Alamos CA 93440

Subject: **Completion Report for Water Well Permit #104011**
(Assessor's Parcel Number: 101-050-022, @ 700 Long 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. 0104011
Page 1 of 1 pages

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

Well Permit Application Received: Date 9/22/05

Site Investigation By J. Pearce Date 9/23/05

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
Set backs - OK

Application Reviewed and Approved: By J. Pearce Date 9/23/05

Work Investigation Record

Date 10/6/05

Well Site #: 1

Casing Information

Type: Steel ☐ PVC ☒ Other ☐

Class/Gage/NSF: SDR21

ASTM#: F480

Diameter: 6" Total Depth: 550

Casing Schedule

0'	440	=	Blank
440	550	=	Screen
		=	
		=	
		=	
		=	
		=	

Borehole

Total Depth of Well: 550'

Annular Seal Depth: 45'

Well Bore Diameter: 12 1/4"

Sealing Material: 6-sack cement

Amount: 3 yds

Method of Pour: Pump

Use of Tremie: Yes - 50'

Driller(s): Filipponi & Thompson Drilling

Comments: Production casing capped this date

Final Inspection and Approval/Denial: By J. Pearce Date 10/6/05

Notice of Work Acceptance/Rejection Sent to Well owner On 10/10/05

W-320P Rev. 12/89

9N32W 29K 2 CC182

Santa Barbara County
PUBLIC Health
DEPARTMENT

Environmental Health Services

225 Camino Del Remedio • Santa Barbara, CA 93110
805/681-4900 • FAX 805/681-4901

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

Elliot Schulman, MD, MPH *Director/ Health Officer*
Anne M. Faron *Deputy Director*
Suzanne Jacobson, CPA *Deputy Director*
Michele Mickiewicz, MPH *Deputy Director*
Jane Overbaugh *Deputy Director*

April 16, 2008

(b) (6)

Subject: **Completion Report for Water Well Permit # SR0105540**
(Assessor's Parcel Number: 101-050-023, 6764 Long Cyn Rd, SM, CA

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 require 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 System 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, REHS
Environmental Health Specialist

PC: Assessor's Office

MCS

105540

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

Well Permit Application Received: Date 4/3/08

Site Investigation By J. Davies Date 4/7/08

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

Set backs - OK

Assessor - OK

Application Reviewed and Approved: By J. Davies Date 4/8/08

Work Investigation Record

Date 4/15/2008

Well Site #: 1

Casing Information

Type: Steel ☐ PVC ☒ Other ☐

Class/Gage/NSF: SDR-21

ASTM#: F480

Diameter: 6" Total Depth: 600

Casing Schedule

0' - 300' = Blank

300 - 600 = Screen

Borehole

Total Depth of Well: 600'

Annular Seal Depth: 63'

Well Bore Diameter: 12 1/4"

Sealing Material: 6-sack cement

Amount: 3 yds

Method of Pour: Pump

Use of Tremie: yes 50'

Driller(s): McDonald + Bender Drilling

Comments: Production casing capped this date

Final Inspection and Approval/Denial: By J. Davies Date 4/15/08

Notice of Work Acceptance/Rejection Sent to Well owner On 4/16 08

W-320P Rev. 12/89

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

WELL PERMIT APPLICATION

TYPE OF PERMIT (*Please check the appropriate box below*)

☐	Construction or Modification	$600 (3 hrs.) *	[4669]	"Modification" means the deepening of a well, reperforation, sealing or replacement of well casing – construction of one completed well
☐	Well Inactivation	$500 (2.5 hrs) *	[4667]	Not used for a period of one year
☐	Well Destruction	$400 (2 hrs) *	[4668]	Abandonment - Complete filling of the well

FOR OFFICE USE ONLY
Rec'd Date: 4-3-08
Rec'd By: Vilanda
SR # 105540
District # 207

* An hourly rate fee of $110 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.

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

1. Property lines
2. Drainage pattern of the property
3. Access roads and easements (water, sewer, utility, roadway)
4. Existing and/or proposed structures.
5. Existing wells within a one hundred foot radius of the proposed well
6. Animal or fowl enclosure, pens, paddocks, stockyards within a one hundred foot radius of proposed well site
7. Sewage disposal systems or works carrying or containing sewage or industrial wastes within a two hundred foot radius of the proposed well
8. All perennial, seasonal, natural, or artificial water bodies or watercourses, including location of one hundred year floodplain, if applicable

APPLICANT: ☐ Property Owner ☒ Licensed Well Drilling Contractor ☐ Owner's Agent (*Authorized in writing*)

Property Owner [redacted]

Mailing Address: [redacted]

(b) (6)

Site Location: Same as above
Street Direction Street Name City State/Zip Code

(*If applicant is other than Property Owner*):

Applicant's Name McDonald & Bender Drilling Inc Telephone No. (____) 922 - 2022

Applicant's Address: 1226 W. Furukawa Way #A, Santa Maria, CA 93458
Street Direction Street Name City State/Zip Code

Assessor's Parcel Number 101 - 050 - 023 Start: ___/___/___ Finish: ___/___/___

Well Use: ☒ Domestic Water ☐ Agriculture Water ☐ Cathodic ☐ Test ☐ Other _____

Drilling Method: ☒ Rotary ☐ Cable ☐ Other _____

Other Water Sources: ☐ Public ☐ Private ☒ None

Proposed Depth 580 ft.

Well Bore Diam. 14 in.

Sealing Material (Check)

☐ Neat Cement ☐ Clay

☒ Cement Grout ☐ Concrete

6 sk. sand slurry

Casing Information

Type: ☐ Steel ☒ PVC ☐ Other SDR 21 Class 200

Wall / Gage _____ in. Diameter 6" in. Annular Seal Depth 50 ft.

Additional Work Description _____

Note: A 50 ft. annular seal is required for wells serving multiple connections.

EHS 46-1 (Rev. 12/06)

LEGAL DECLARATION

LICENSED CONTRACTOR DECLARATION

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

Jakob Bender — Print Name of Driller | [signature] — Signature of Driller | 3/24/08 — Date

Lic. No.: C57 849201 Office Telephone 922-2022 Cell Phone: 896-4192

Business Name: McDonald & Bender Address 1226 W. Furukawa Way #A, SM CA

(Complete 'A' or 'B')

A. WORKERS' COMPENSATION DECLARATION

I hereby affirm one of the following:

- ☒ 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 State fund Policy No. 1858390-07

Applicant Signature [signature] Date 3/24/08

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 an manner so as to become subject to the Worker's Compensation Laws of California.

Applicant Signature _____ Date _____

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

WHEN SIGNED BY AN AUTHORIZED ENVIRONMENTAL HEALTH SERVICES REPRESENTATIVE, this application shall be deemed a permit for the work described. Please note that separate permits (such as 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 one year from date of issuance. 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.

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.

NOTE: After permit approval, an inspection must be scheduled at least twenty-four hours in advance directly with the approving Environmental Health Specialist for:

1. The sealing of the annular space on a well;
2. The destruction of wells; and
3. Any operation stipulated on the permit to address special or unusual conditions.

Jakob Bender — Applicant (Print Name) | [signature] — Applicant's Signature | 4/3/08 — Date

FOR DEPARTMENT USE ONLY

Fixed Fee: Rec'd by: Velinda Date Rec'd: 4-3-08 Amt. Rec'd: $ 600.00 Check No.: 3002 Receipt No: 1901881

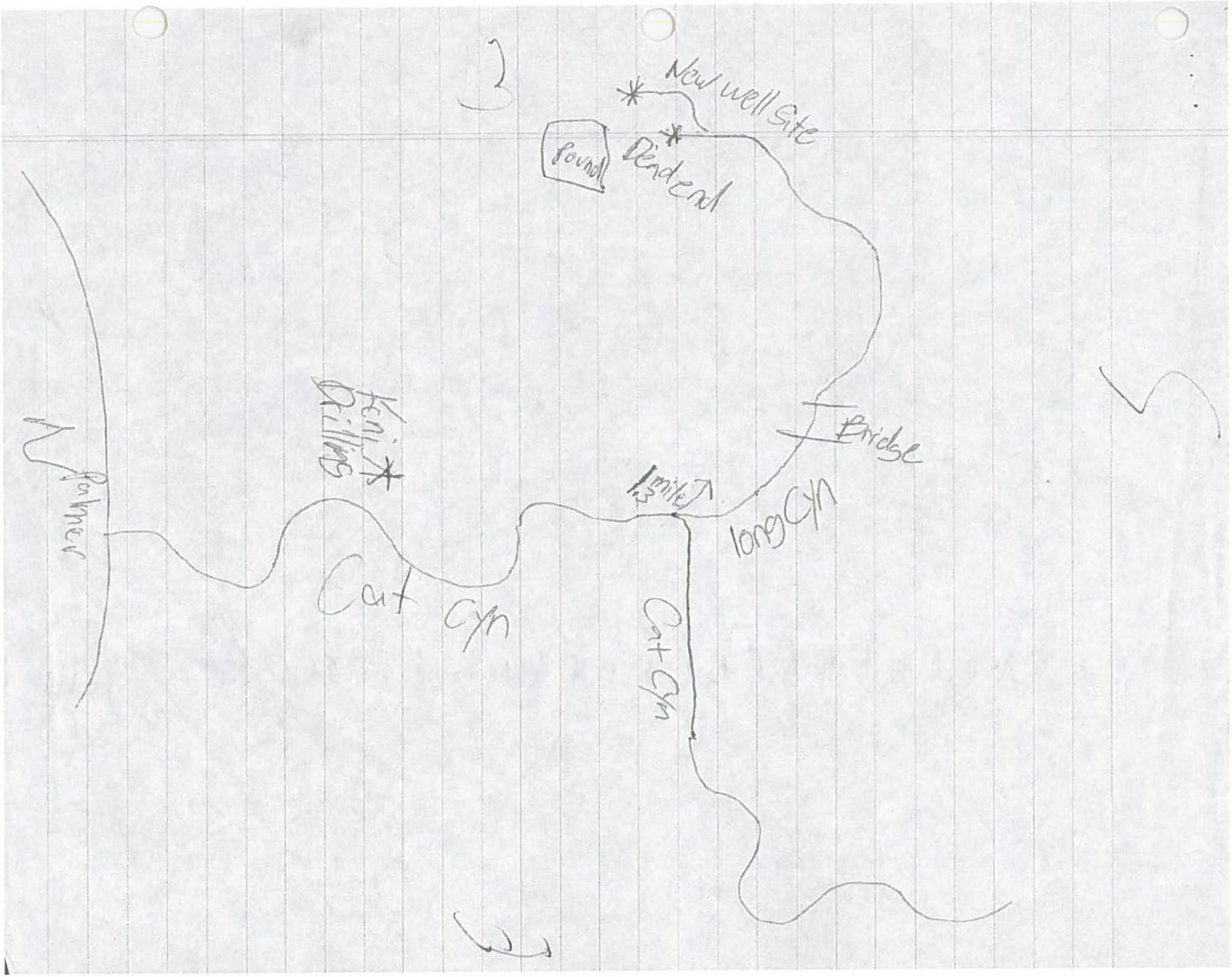
Hourly Billing: Applicant notified by Plan Check (Initials): _____ Date: _____

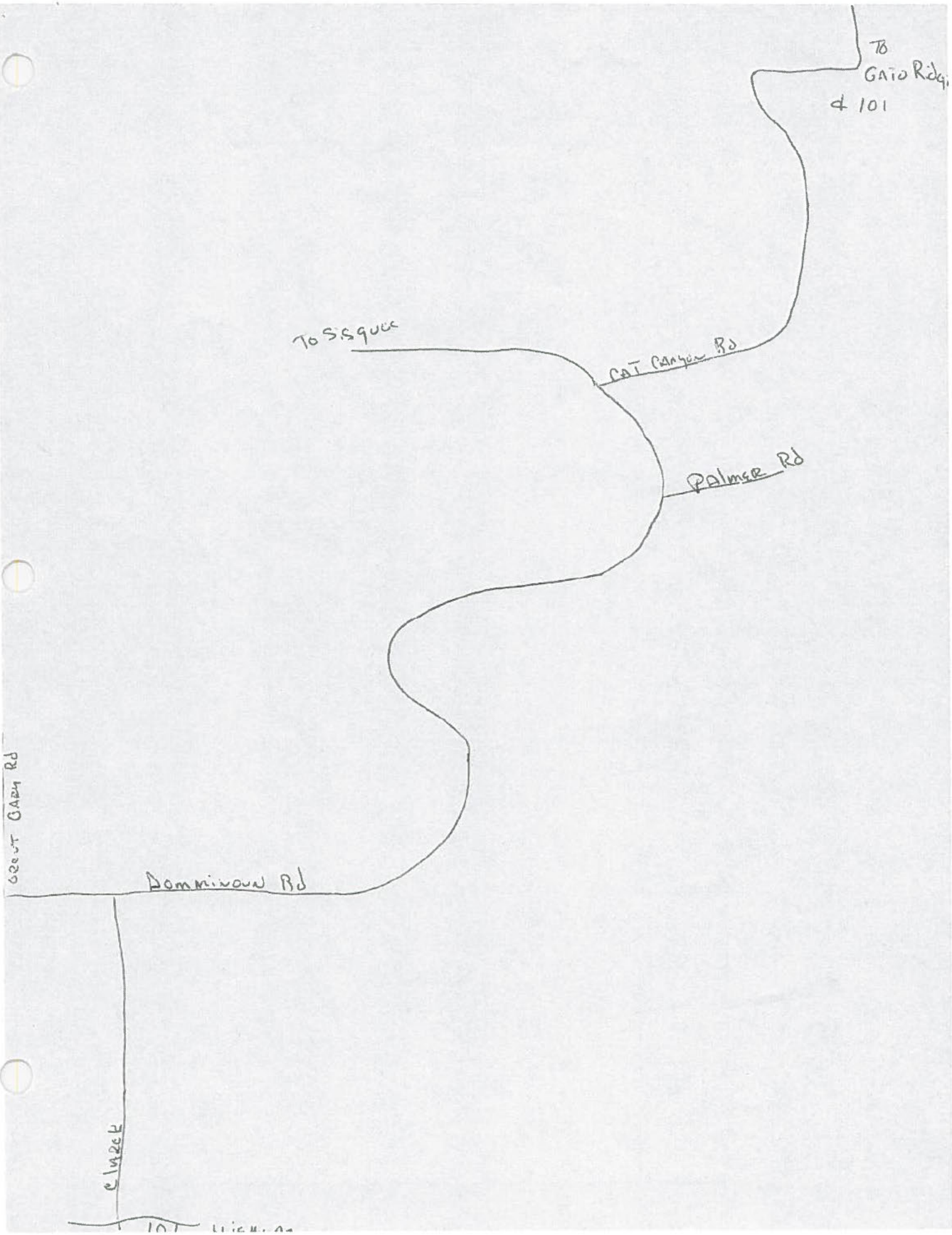
Rec'd by: _____ Date Rec'd: _____ Amt. Rec'd: $ _____ Check No.: _____ Receipt No: _____

EH Specialist [signature] Application Disposition: ☒ Approved ☐ Denied Date: 4/8/08

Final Clearance by [signature] Date: 4/16/08

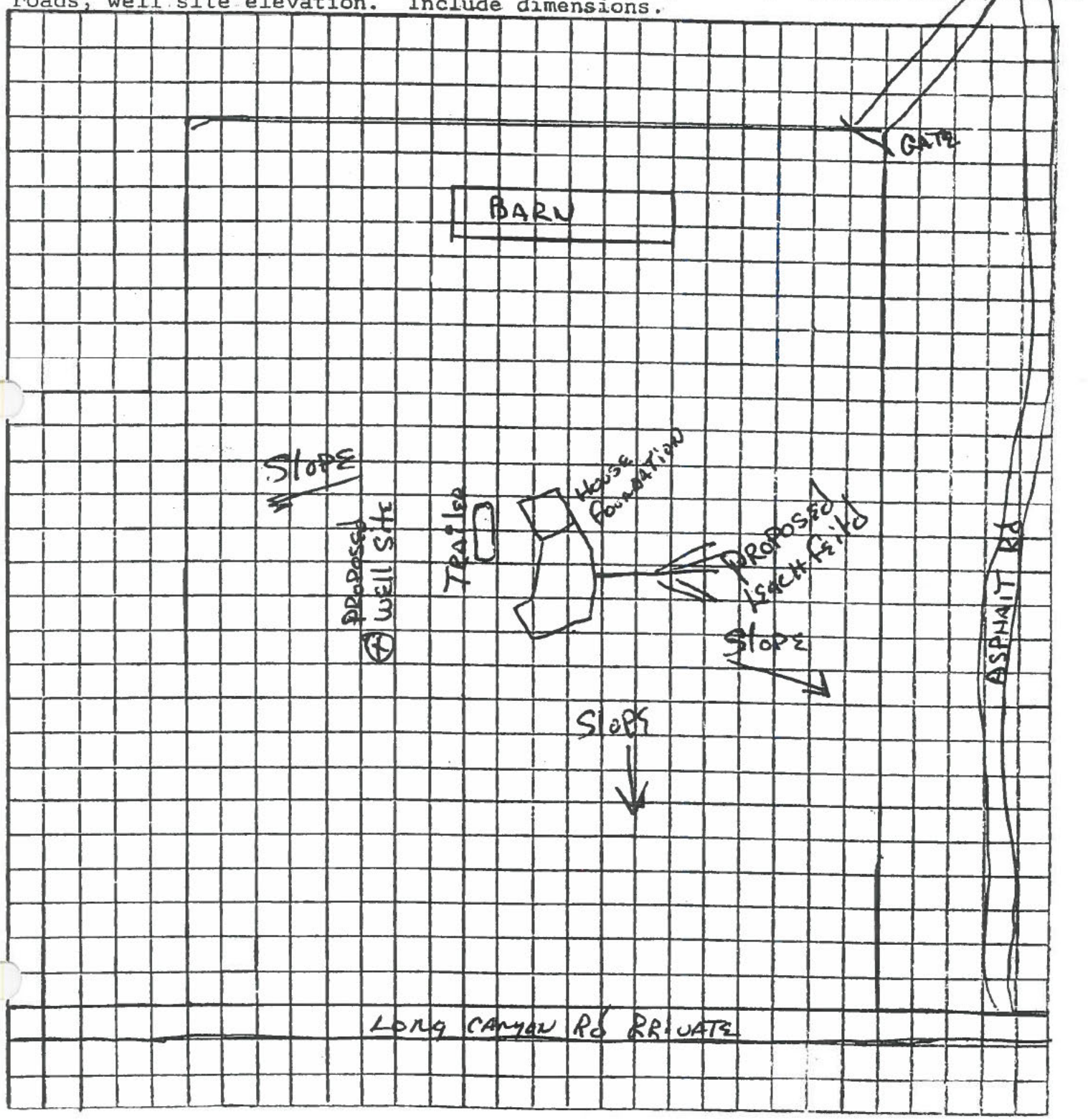
Comments: _____


New well Site
Round
Dead end
Bridge
1/3 mile
long Cyn
Cat Cyn
Cat Cyn
Exit Drilling
Palmer


To
Gato Ridge
& 101
To Sisquoc
Cat Canyon Rd
Palmer Rd
Great Oaks Rd
Dominion Rd
Clinton

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.



Permit No. 2182

Page ___ of ___ pages

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

Well Permit Application Received: Date 4/13/82

Site Investigation: By Steven C. Dastic Date 4/13/82

Findings: Site meets all distance requirements - not subject to flooding. 6-2-82 (McCormick called - he came up w/ dry hole - no decision yet to move site, he will back fill hole when moving off site.)

Application Reviewed and Approved: By _____ Date / /

Work Investigation Record

Findings: _____

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

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

H-95 10/75

9N 32W 31

09N 32W 31 CC183

*The free Adobe Reader may be used to view and complete this form. However, software must be purchased to complete, save, and reuse a saved form.

File Original with DWR 09N 32W 31

State of California

Well Completion Report

Refer to Instruction Pamphlet

No. e073644

Page 1 of 1

Owner's Well Number 2

Date Work Began 07/05/2007 Date Work Ended 7/12/2007

Local Permit Agency Santa Barbara Enviromental Health

Permit Number SR0105007 Permit Date 5/17/07

DWR Use Only – Do Not Fill In

State Well Number/Site Number

Latitude N Longitude W

APN/TRS/Other

Geologic Log

Orientation ⦿ Vertical ○ Horizontal ○ Angle Specify

Drilling Method Reverse Circulation Rotary Drilling Fluid Fresh Water

Depth from Surface Feet	to Feet	Description. Describe material, grain size, color, etc
0	3	Topsoil
3	80	Clay
80	102	Sand & Gravel
102	260	Fine Sand & Clay

Total Depth of Boring 260 Feet

Total Depth of Completed Well 260 Feet

Well Owner

Well Location

Address 6745

City Cat Canyon Road County Santa Barbara

Latitude ___ Deg. ___ Min. ___ Sec. N Longitude ___ Deg. ___ Min. ___ Sec. W

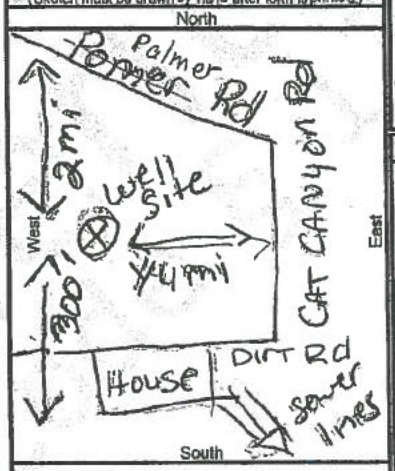
Datum ___ Decimal Lat. ___ Decimal Long. ___

APN Book 101 Page 070 Parcel 004

Township 9N Range 32W Section 31

Location Sketch

(Sketch must be drawn by hand after form is printed.)



Illustrate or describe distance of well from roads, buildings, fences, rivers, etc. and attach a map. Use additional paper if necessary. Please be accurate and complete.

Activity

⦿ New Well

○ Modification/Repair

○ Deepen

○ Other ___

○ Destroy

Describe procedures and materials under "GEOLOGIC LOG"

Planned Uses

⦿ Water Supply

☑ Domestic ☐ Public

☐ Irrigation ☐ Industrial

○ Cathodic Protection

○ Dewatering

○ Heat Exchange

○ Injection

○ Monitoring

○ Remediation

○ Sparging

○ Test Well

○ Vapor Extraction

○ Other ___

Water Level and Yield of Completed Well

Depth to first water 60 (Feet below surface)

Depth to Static Water Level ___ (Feet) Date Measured ___

Estimated Yield * ___ (GPM) Test Type ___

Test Length ___ (Hours) Total Drawdown ___ (Feet)

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

Casings

Depth from Surface Feet	to Feet	Borehole Diameter (Inches)	Type	Material	Wall Thickness (Inches)	Outside Diameter (Inches)	Screen Type	Slot Size if Any (Inches)
0	15	32	Conductor	Low Carbon Steel	30	1/4		
0	140	20	Blank	PVC Sch. 40	8	SDR17		
140	260	20	Screen	Certa-Lok	8	SDR17	Louver	

Annular Material

Depth from Surface Feet	to Feet	Fill	Description
0	50	Cement	6 Sac
0	260	Filter Pack	10x20 gravel pac

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 Coast Drilling Inc (Person, Firm or Corporation)

231 Pomeroy Ave Suite G (Address) Pismo Beach (City) CA (State) 93449 (Zip)

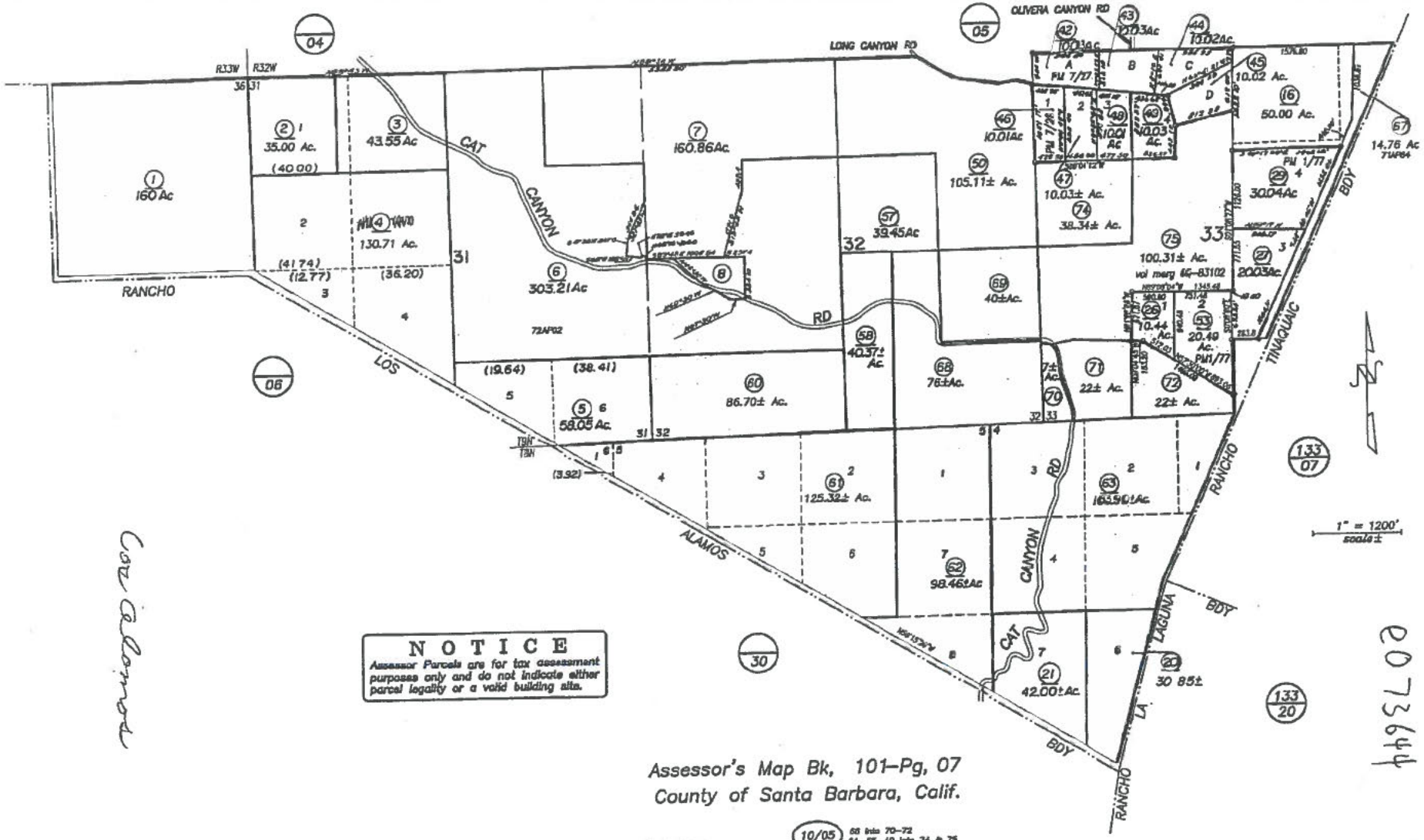
Signed [signature] (C-57 Licensed Water Well Contractor) 05-29-08 (Date Signed) 905479 (C-57 License Number)

DWR 188 REV. 1/2006

IF ADDITIONAL SPACE IS NEEDED, USE NEXT CONSECUTIVELY NUMBERED FORM

POR. T8-9N R32-33W SBB&M

101-07



Cat Canyon

0073644

9N 32W 32

34°49'12.88" 120°15'45.29" 9N 32W 32A01 CC184

QUADRUPLICATE
For Local Requirements

STATE OF CALIFORNIA
WELL COMPLETION REPORT
Refer to Instruction Pamphlet

No. 0905312

Page ___ of ___
Owner's Well No. 1
Date Work Began 4-27-05, Ended 5-20-05
Local Permit Agency Santa Barbara Co
Permit No. 50-10224 Permit Date 4-19-05

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

GEOLOGIC LOG

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

DEPTH FROM SURFACE Ft.	to Ft.	DESCRIPTION *Describe material, grain size, color, etc.*
0	8	Hard Brown Sand
8	81	Brown Clay
81	120	Sand White
120	129	Brown Sandy Clay
129	334	Fine Brown Sand
334	354	Brown Sandy Clay
354	550	Gray Sandy Silt

TOTAL DEPTH OF BORING 550 (Feet)
TOTAL DEPTH OF COMPLETED WELL 522 (Feet)

RECEIVED
JUN 08 2005
ENVIRONMENTAL HEALTH SERVICES

WELL OWNER

Name Dave & Sandra Fulton
Mailing Address 2801 Mahoney Rd
CITY Santa Maria Calif 93455 STATE ZIP

WELL LOCATION

Address 2801 Long Cyn
City Santa Maria Calif 93455
County Santa Barbara
APN Book ___ Page ___ Parcel 101-050-023
Township ___ Range ___ Section ___
Lat ___ DEG. MIN. SEC. N Long ___ DEG. MIN. SEC. W

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 (✓)

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

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
DEPTH OF STATIC WATER LEVEL 110 (Ft.) & DATE MEASURED 5-03-05
ESTIMATED YIELD * 6 (GPM) & TEST TYPE Pump
TEST LENGTH 12 (Hrs.) TOTAL DRAWDOWN 205 (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 – 322	11	✓				PVC	5	SDR-21	
322 – 522	11		✓			PVC	5	SDR-21	040

ANNULAR MATERIAL

DEPTH FROM SURFACE Ft. to Ft.	TYPE: CEMENT (✓)	BENTONITE (✓)	FILL (✓)	FILTER PACK (TYPE/SIZE)
0 – 41	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 Santa Maria Calif 93455 CITY STATE ZIP
Signed [signature] C-57 LICENSED WATER WELL CONTRACTOR DATE SIGNED 6-08-05 C-57 LICENSE NUMBER 522-848

DWR 188 REV. 05-03 IF ADDITIONAL SPACE IS NEEDED, USE NEXT CONSECUTIVELY NUMBERED FORM

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

May 16, 2005

(b) (6)

Subject: **Completion Report for Water Well Permit # SR0103734**
(Assessor's Parcel Number: 101-050-023

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 System 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. 0103734
Page 1 of 1 pages

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

Well Permit Application Received: Date 4 / 19 / 05

Site Investigation By J. Davies Date 4/20/05

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 4/20/05

Work Investigation Record

Date 5/13/05

Well Site #: 1

Casing Information

Type: Steel ☐ PVC ☒ Other ☐

Class/Gage/NSF: SPR 21

ASTM#: F-480

Diameter: 5" Total Depth: 522

Casing Schedule

322' - 322 = Blank Part
322' - 522 = Perf

Borehole

Total Depth of Well:

Annular Seal Depth: 21'

Well Bore Diameter: 11"

Sealing Material: 6-sack cement

Amount: 1 yd

Method of Pour: Gravity

Use of Tremie: No

Driller(s): Ron Taylor

Comments: Production casing capped this date

Final Inspection and Approval/Denial: By J. Davies Date 5/13/05

Notice of Work Acceptance/Rejection Sent to Well owner On 5/17/05

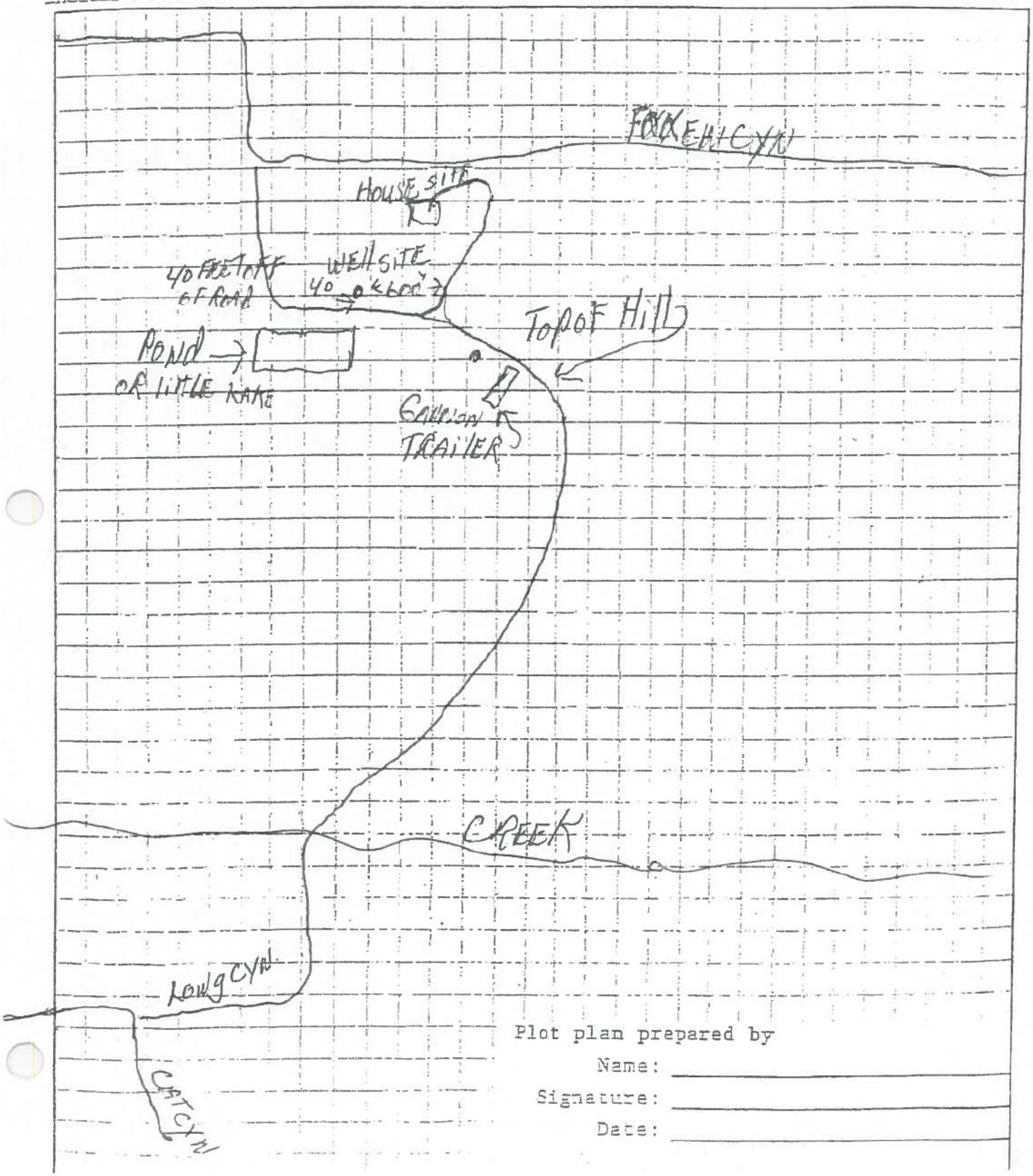
W-320P Rev. 12/89

WELL PERMIT APPLICATION

Permit No. _____

Plot Plan (½" = 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 elevatio Include dimensions.



Plot plan prepared by

Name: _____

Signature: _____

Date: _____

9N32W32A02 9N/32W-33D ? 33F? 32A

*The free Adobe Reader may be used to view and complete this form. However, software must be purchased to complete, save, and reuse a saved form.

File Original with DWR 09 N 32W 33

State of California

Well Completion Report

Refer to Instruction Pamphlet

No. e036658

Page 1 of 1

Owner's Well Number 1

Date Work Began 12/17/2005 Date Work Ended 1/10/2006

Local Permit Agency Santa Barbara County Health

Permit Number 104144 Permit Date 12/12/05

DWR Use Only – Do Not Fill In

State Well Number/Site Number

Latitude N Longitude W

APN/TRS/Other

Geologic Log

Orientation ◉ Vertical ○ Horizontal ○ Angle Specify

Drilling Method Direct Rotary Drilling Fluid Bentonite mud

Depth from Surface Feet	to Feet	Description (Describe material, grain size, color, etc)
0	80	Small gravels, Fine sand.
80	120	Small gravels, Some brown clay, Fine sand.
120	290	1/4" gravel, coarse sand, fine sand.
290	335	Small gravels, fine sand.
335	340	Brown clay, some small gravels, coarse sand, fine sand.
340	360	Gray clay, some coarse sand, fine sand.
360	440	1/4" gravel, coarse sand, fine sand.
440	466	Gray clay, some coarse sand, fine sand.
466	500	Less gray clay, small gravels, coarse sand, fine sand.

Total Depth of Boring 500 Feet

Total Depth of Completed Well 450 Feet

Well Owner

3 4 4h 12.4h 120 15 4h.66

Well Location

Address Long Cyn. Road/ off Cat Cyn. Rd.

City Los Alamos County Santa Barbara

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

Datum Decimal Lat. Decimal Long.

APN Book 101 Page 070 Parcel 050

Township Range Section

Location Sketch

(Sketch must be drawn by hand after form is printed.)

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 and complete.

Activity

◉ New Well

○ Modification/Repair

○ Deepen

○ Other

○ Destroy

Describe procedures and materials under "GEOLOGIC LOG"

Planned Uses

◉ Water Supply

☑ Domestic ☐ Public

☐ Irrigation ☐ Industrial

○ Cathodic Protection

○ Dewatering

○ Heat Exchange

○ Injection

○ Monitoring

○ Remediation

○ Sparging

○ Test Well

○ Vapor Extraction

○ Other

Water Level and Yield of Completed Well

Depth to first water 330 (Feet below surface)

Depth to Static Water Level 325 (Feet) Date Measured 02/07/2006

Estimated Yield * 1 (GPM) Test Type Constant Rate

Test Length 4.0 (Hours) Total Drawdown (Feet)

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

Casings

Depth from Surface Feet	to Feet	Borehole Diameter (Inches)	Type	Material	Wall Thickness (Inches)	Outside Diameter (Inches)	Screen Type	Slot Size If Any (Inches)
0	220	12 1/4"	Blank	PVC Sch. 40		6"		
220	300	12 1/4"	Screen	PVC Sch. 40		6"	Bridge Slot	0.040
300	340	12 1/4"	Blank	PVC Sch. 40		6"		
340	440	12 1/4"	Screen	PVC Sch. 40		6"	Bridge Slot	0.040
440	450	12 1/4"	Blank	PVC Sch. 40		6"		

Annular Material

Depth from Surface Feet	to Feet	Fill	Description
0	50	Cement	6 sack slury
50	450	Filter Pack	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 (Person, Firm or Corporation)

1337 W. BETTERAVIA RD. (Address) SANTA MARIA (City) CA (State) 93454 (Zip)

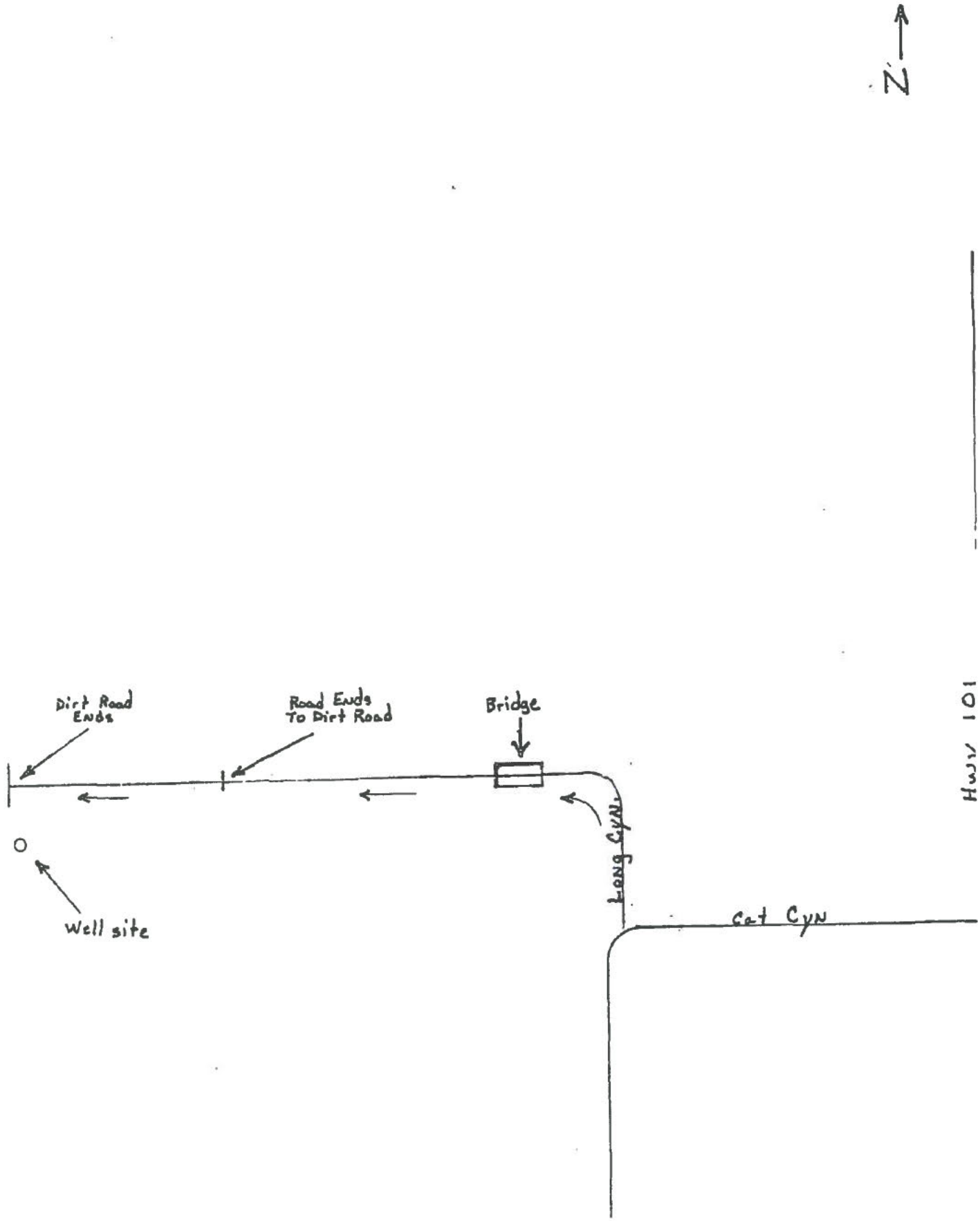
Signed (C-57 Licensed Water Well Contractor) 2/28/2006 (Date Signed) C-57-229570 (C-57 License Number)

DWR 188 REV. 1/2006

IF ADDITIONAL SPACE IS NEEDED, USE NEXT CONSECUTIVELY NUMBERED FORM

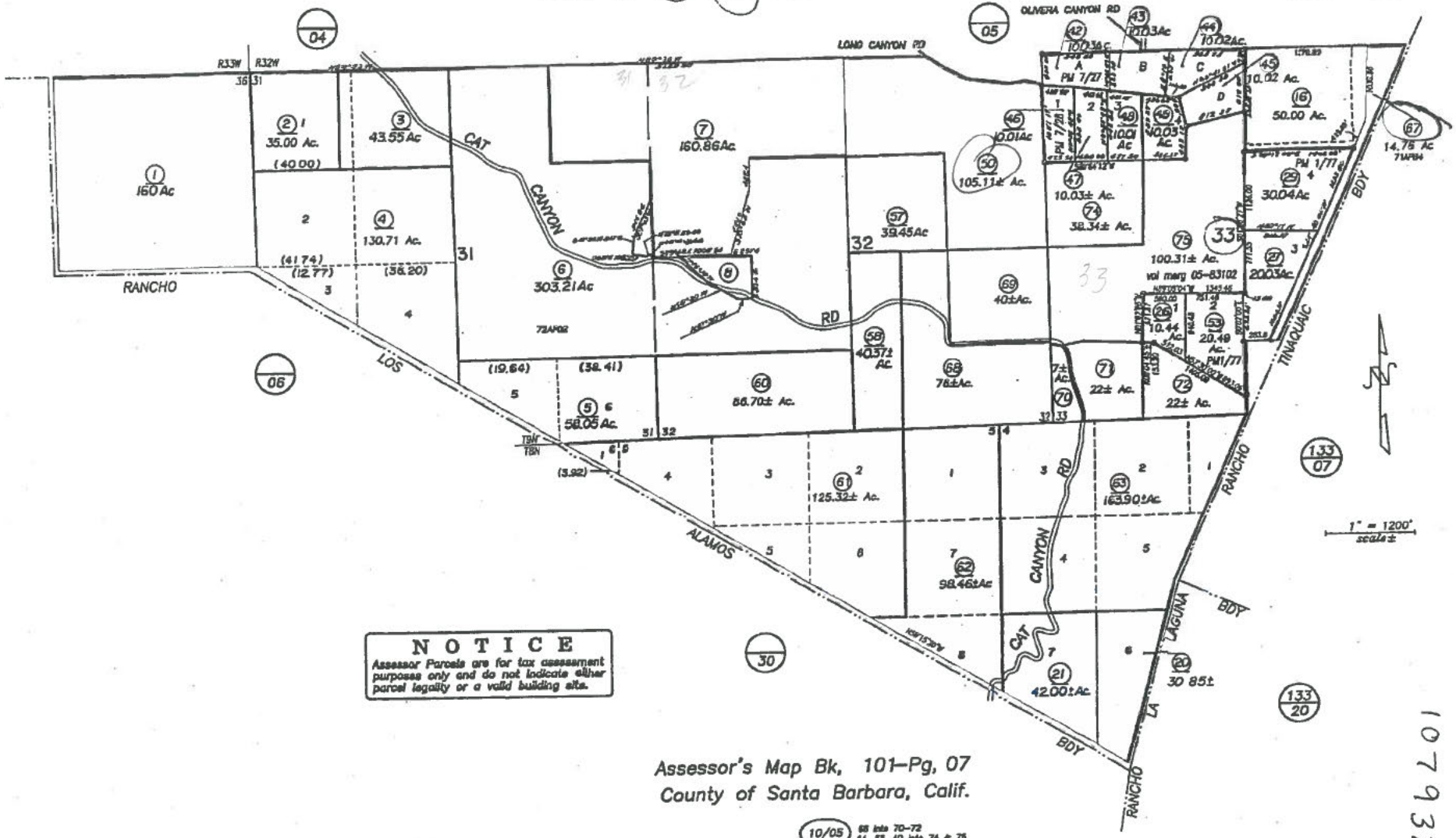
5 = Map

e036658



POR. T8-9N R32-33W SBB&M

101-07



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, 07
County of Santa Barbara, Calif.

(10/05) 68 into 70-72
64, 63, 40 into 74 & 75

1079323

✓ (32J) 9N 32W 32J1 CC186

ORIGINAL
File with DWR

09N 32W 30 ~~002~~

STATE OF CALIFORNIA
WELL COMPLETION REPORT
Refer to Instruction Pamphlet

No. **E039478**

Owner's Well No. B-5
Date Work Began 6/9/2006, Ended 6/9/2006
Local Permit Agency Santa Barbara County
Permit No. 0104353 Permit Date 4/26/2006

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

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	70	SANDY BROWN CLAY
70	97	SAND & GRAVEL
97	102	BROWN CLAY
102	140	GREY SILTY CLAY

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

TOTAL DEPTH OF BORING 140 (Feet)
TOTAL DEPTH OF COMPLETED WELL 140 (Feet)

WELL OWNER

WELL LOCATION

Address 7000 Long Canyon
City Los Alamos CA
County Santa Barbara
APN Book 101 Page 070 Parcel 069
Township ____ Range ____ Section ____
Latitude DEG. MIN. SEC. DEG. MIN. SEC.

LOCATION SKETCH

NORTH
WEST EAST
34 48' 47.88
120 15' 35.72"
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 45 (Ft.) & DATE MEASURED 6/9/2006
ESTIMATED YIELD * 50 (GPM) & TEST TYPE Air Lift
TEST LENGTH 1 (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	60	10	✓				F-480 PVC	5	SDR 21	
60	140	10		Perf			F-480 PVC	5	SDR 21	.040

ANNULAR MATERIAL

DEPTH FROM SURFACE Ft.	to Ft.	TYPE CEMENT (✓)	BENTONITE (✓)	FILL (✓)	FILTER PACK (TYPE/SIZE)
0	52	✓			
52	140			✓	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 CITY ATASCADERO STATE CA ZIP 93423
Signed [signature] WELL DRILLER/AUTHORIZED REPRESENTATIVE DATE SIGNED 06/14/06 C-57 LICENSE NUMBER 432680

DWR 188 REV. 11-97

IF ADDITIONAL SPACE IS NEEDED, USE NEXT CONSECUTIVELY NUMBERED FORM

WELL PERMIT PLOT PLAN

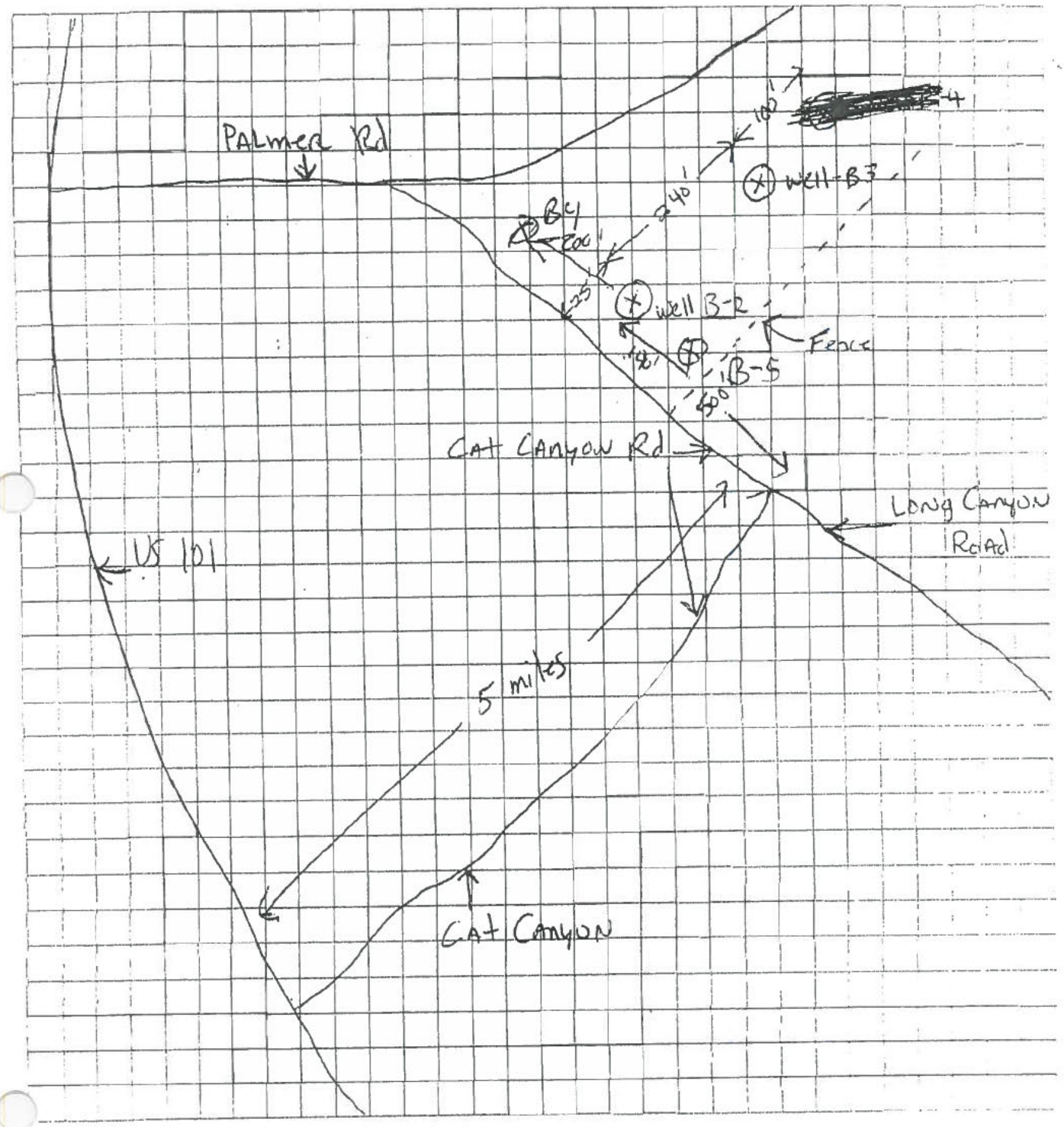
LUIS OBISPO COUNTY ENVIRONMENTAL HEALTH SERVICES
56 Sierra Way
San Luis Obispo, California 93401
Telephone: 805-781-5544

LNA-LP
(mike Brand)

e039478

SCALE: ¼" = 25'

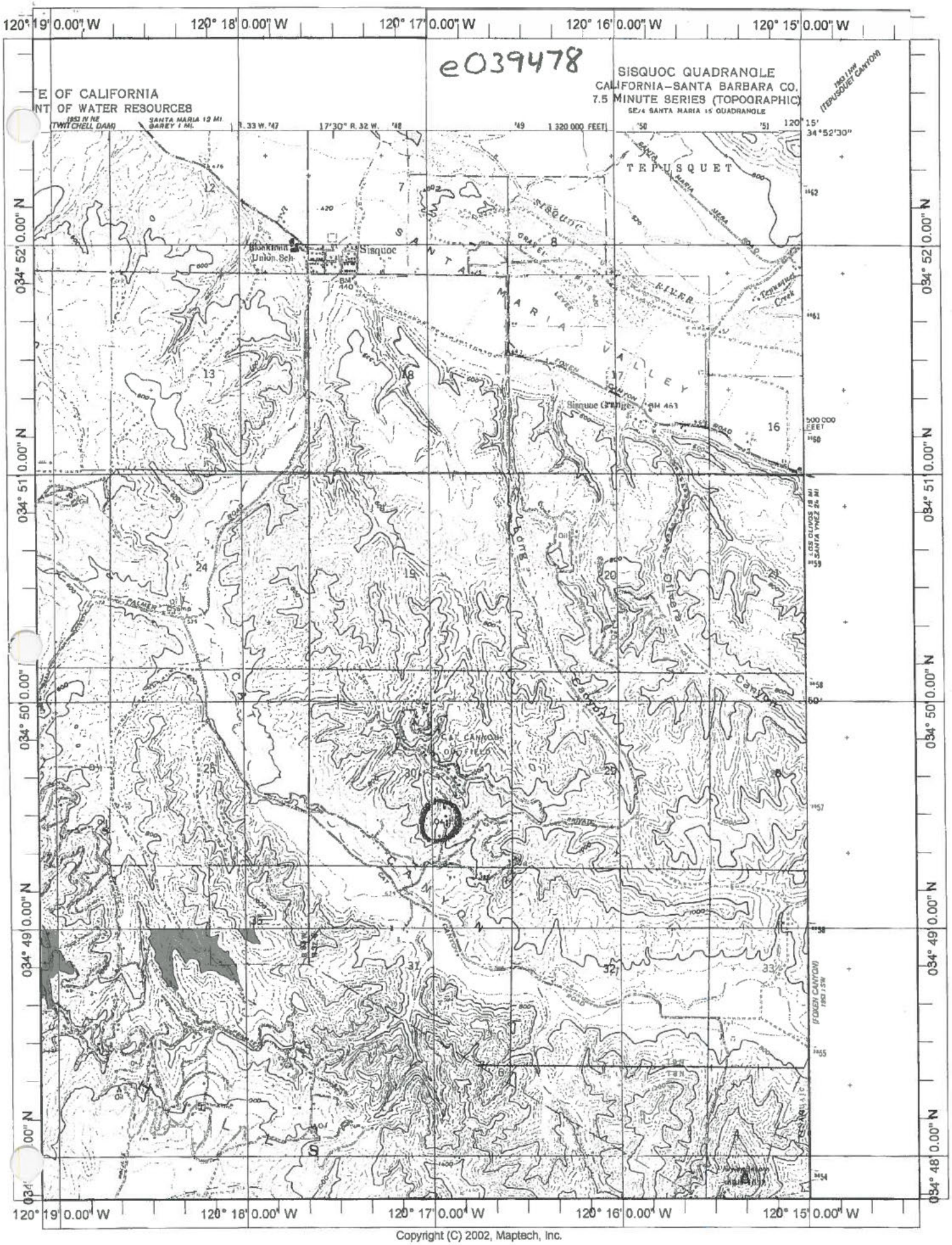
INDICATE BELOW THE **EXACT LOCATION** OF PROPOSED WELL WITH RESPECT TO THE FOLLOWING ITEMS: PROPERTY LINES, WATER BODIES OR WATER COURSES, DRAINAGE PATTERN, ROADS, EXISTING WELLS, SEWERS AND PRIVATE SEWAGE DISPOSAL SYSTEMS AND ANY OTHER CONCENTRATED SOURCES OF POLLUTION. **INCLUDE DIMENSIONS.** ALL PROPOSED WELL SITES SHALL BE DESIGNATED WITH A FLAGGED SURVEYOR'S STAKE LABELED "WELL SITE." DRILLING SHALL NOT COMMENCE UNTIL THIS APPLICATION IS APPROVED.



e039478

E OF CALIFORNIA
NT OF WATER RESOURCES

SISQUOC QUADRANGLE
CALIFORNIA–SANTA BARBARA CO.
7.5 MINUTE SERIES (TOPOGRAPHIC)
SE/4 SANTA MARIA 15 QUADRANGLE



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09N 32W 32J2 CC187

(32J2)

ORIGINAL
File with DWR

09N 32W 30 G01

STATE OF CALIFORNIA
WELL COMPLETION REPORT
Refer to Instruction Pamphlet

No. E039477

Page 1 of 1

Owner's Well No. B-2

Date Work Began 6/6/2006, Ended 6/7/2006

Local Permit Agency Santa Barbara County

Permit No. 0104136 Permit Date 12/8/2005

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

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	70	SANDY BROWN CLAY
70	95	SANDY CLAY W/GRAVEL LAYERS
95	100	BROWN CLAY
100	140	SILTY GREY CLAY

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

TOTAL DEPTH OF BORING 140 (Feet)

TOTAL DEPTH OF COMPLETED WELL 140 (Feet)

WELL OWNER

WELL LOCATION

Address 7000 Long Canyon

City Los Alamos CA

County Santa Barbara

APN Book 101 Page 070 Parcel 069

Township — Range — Section —

Latitude DEG. MIN. SEC. DEG. MIN. SEC.

LOCATION SKETCH

NORTH

34 48' 46.13

120 15' 35.44

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 45 (Ft.) & DATE MEASURED 6/7/2006

ESTIMATED YIELD * 30 (GPM) & TEST TYPE Air Lift

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	CONDUCTOR	FILL PIPE	MATERIAL / GRADE	INTERNAL DIAMETER (Inches)	GAUGE OR WALL THICKNESS	SLOT SIZE IF ANY (Inches)
0	60	10	✓				F-480 PVC	5	SDR 21	
60	140	10		Perf			F-480 PVC	5	SDR 21	.040

ANNULAR MATERIAL

DEPTH FROM SURFACE Ft.	to Ft.	TYPE CEMENT (✓)	BENTONITE (✓)	FILL (✓)	FILTER PACK (TYPE/SIZE)
0	52	✓			
52	140			✓	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 CITY ATASCADERO STATE CA ZIP 93423

Signed [signature] WELL DRILLER/AUTHORIZED REPRESENTATIVE DATE SIGNED 06/16/06 C-57 LICENSE NUMBER 432680

DWR 188 REV 11-97

IF ADDITIONAL SPACE IS NEEDED, USE NEXT CONSECUTIVELY NUMBERED FORM

WELL PERMIT PLOT PLAN

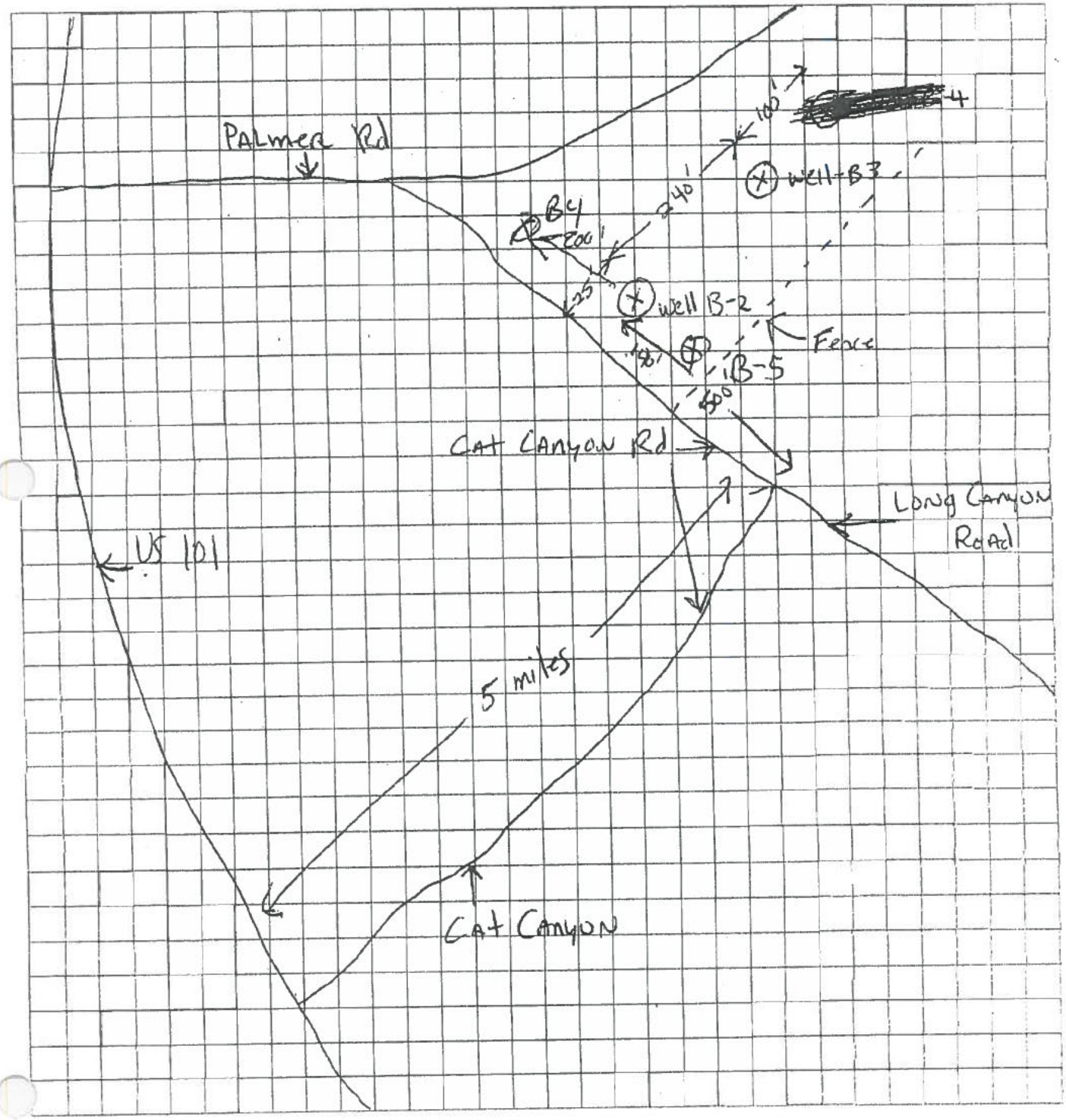
/ LUIS OBISPO COUNTY ENVIRONMENTAL HEALTH SERVICES
,56 Sierra Way
San Luis Obispo, California 93401
Telephone: 805-781-5544

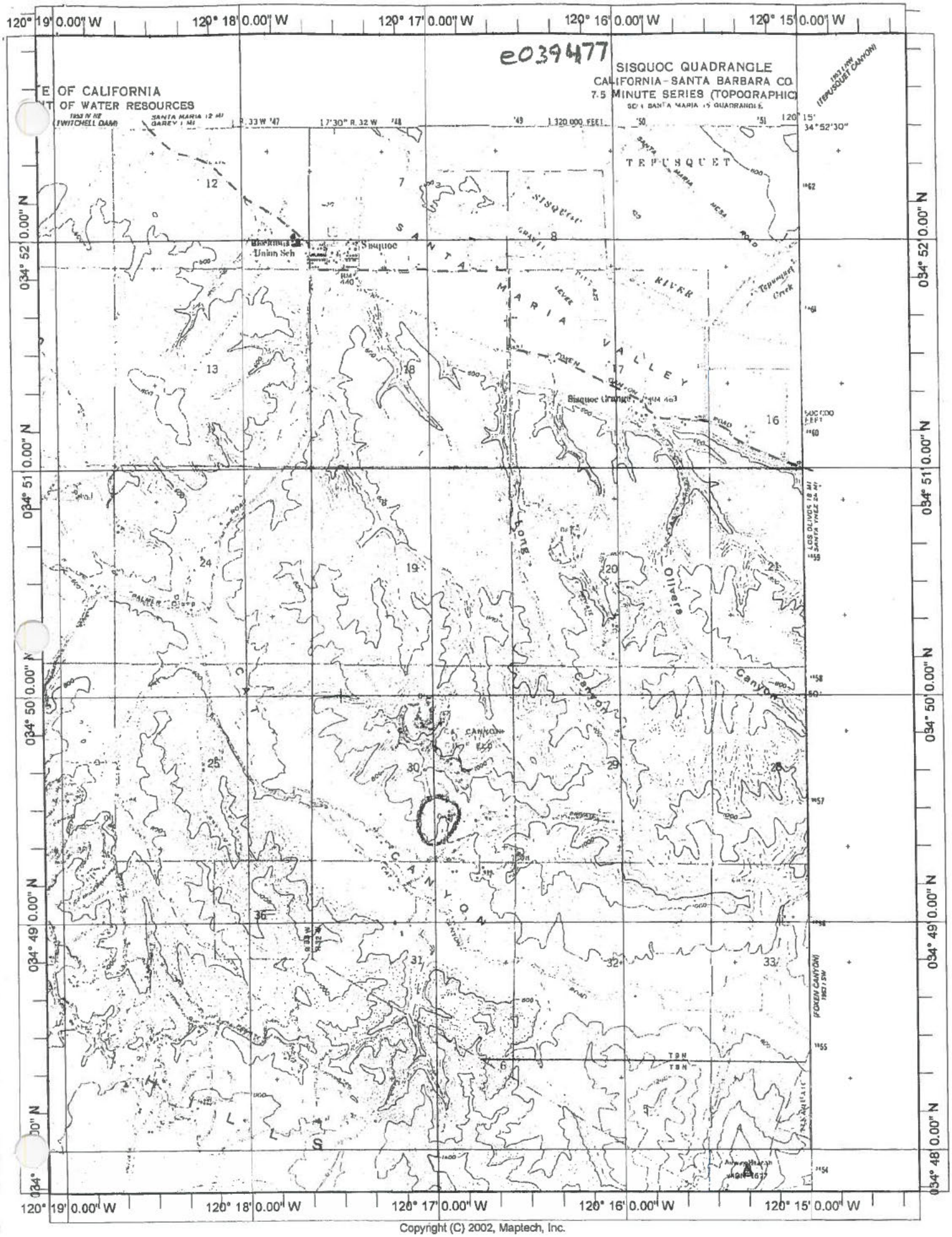
LNA-LP
(Mike Brand)

e039477

SCALE: ¼" = 25"

INDICATE BELOW THE **EXACT LOCATION** OF PROPOSED WELL WITH RESPECT TO THE FOLLOWING ITEMS: PROPERTY LINES, WATER BODIES OR WATER COURSES, DRAINAGE PATTERN, ROADS, EXISTING WELLS, SEWERS AND PRIVATE SEWAGE DISPOSAL SYSTEMS AND ANY OTHER CONCENTRATED SOURCES OF POLLUTION. **INCLUDE DIMENSIONS.** ALL PROPOSED WELL SITES SHALL BE DESIGNATED WITH A FLAGGED SURVEYOR'S STAKE LABELED "WELL SITE." DRILLING SHALL NOT COMMENCE UNTIL THIS APPLICATION IS APPROVED.





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CC188

ORIGINAL
File with DWR

Page 1 of 1

Owner's Well No. 4

Date Work Began 4-5-00 Ended 4-28-00

Local Permit Agency County of Santa Barbara

Permit No. 0101600 Permit Date 4-28-00

STATE OF CALIFORNIA
WELL COMPLETION REPORT
Refer to Instruction Pamphlet

No. 765360

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

GEOLOGIC LOG

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

DRILLING METHOD Rotary FLUID Mud

DEPTH FROM SURFACE Ft.	to Ft.	DESCRIPTION Describe material, grain size, color, etc.
0	30	Soil Horizon, Loamy Dark Brown
30	80	Grey, Brown, Silt, Fine Sand, Clay
80	90	Grey Silty Clay
90	100	Brown/Grey, Sand & Silt w/ Abundant Pebbles & Gravel
100	110	Grey Silty Clay
110	120	Brown/Grey Sandy Silt w/ Gravel
120	155	Grey Silty Clay

TOTAL DEPTH OF BORING 155 (Feet)

TOTAL DEPTH OF COMPLETED WELL 147 (Feet)

WELL OWNER

9N 32W 32-B3

34 48 36.73 120 15 37.61

WELL LOCATION

Address 16 Long Canyon Rd.

City

County Santa Barbara

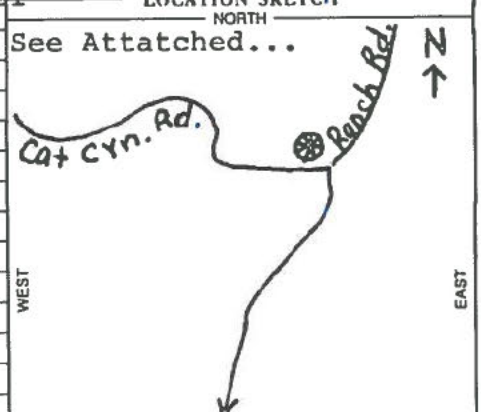
APN Book 100 Page 070 Parcel 066 nonexistent

Township T9N Range R32W Section 32

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

LOCATION SKETCH

See Attatched...



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

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)
0	23	12 1/4	*				PVCF480	6	.316	
23	147	12 1/4		*			PVCF480	6	.316	.040

ANNULAR MATERIAL

DEPTH FROM SURFACE Ft.	to Ft.	TYPE CEMENT (✓)	BENTONITE (✓)	FILL (✓)	FILTER PACK (TYPE/SIZE)
0	23	/			
23	147				8/12

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 Cascade Well & Pump Company
(PERSON, FIRM, OR CORPORATION) (TYPED OR PRINTED)

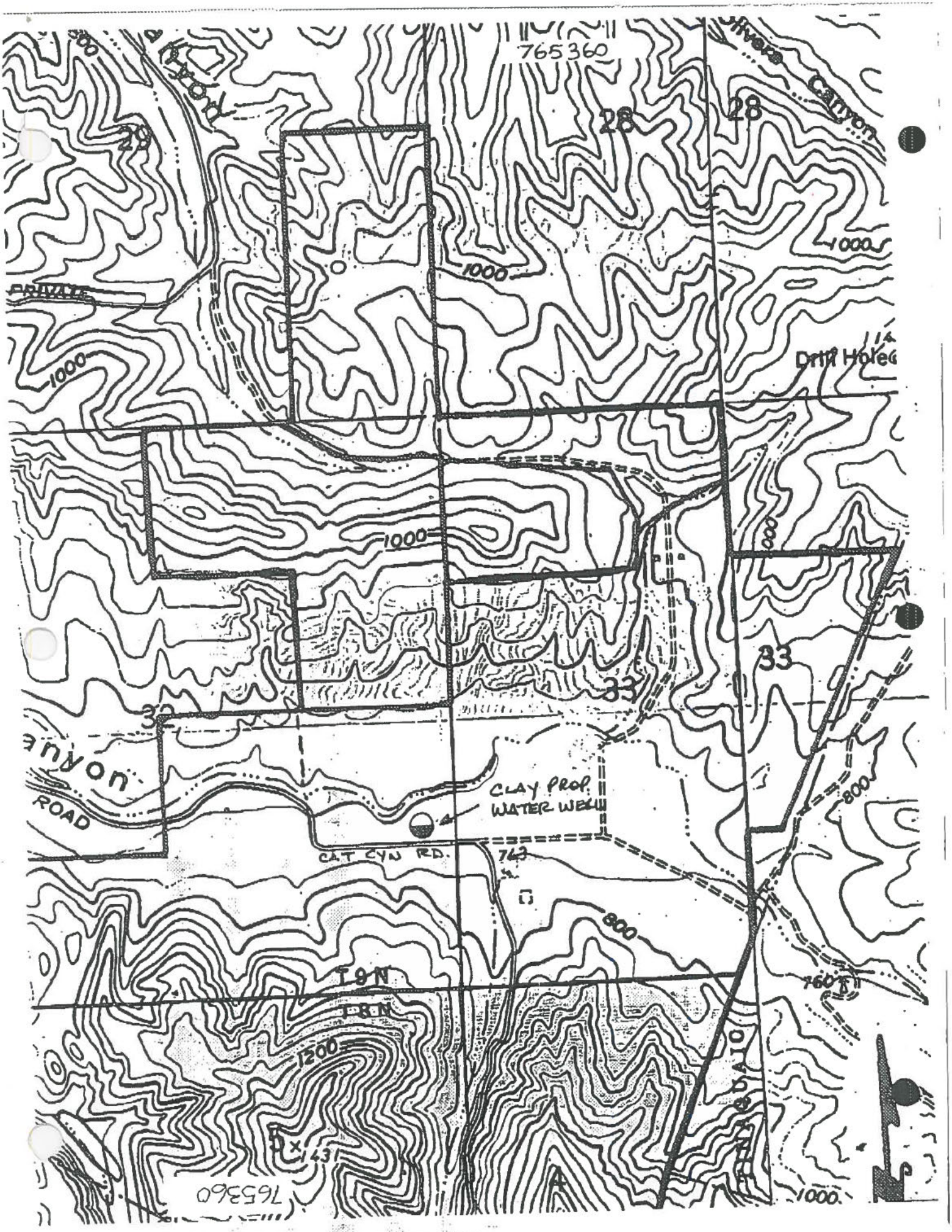
ADDRESS 1200 Via Regina, Santa Barbara, CA 93111
CITY STATE ZIP

Signed [signature]
WELL DRILLER/AUTHORIZED REPRESENTATIVE

DATE SIGNED 11-13-00 C-57 LICENSE NUMBER 496704

DWR 188 REV. 11-97

IF ADDITIONAL SPACE IS NEEDED, USE NEXT CONSECUTIVELY NUMBERED FORM


765360
28
28
29
1000
1000
1000
1000
Drill Hole
33
33
32
CLAY PROP.
WATER WELL
CAT CYN RD.
743
800
800
760
T9N
T8N
1200
1431
765360
1000

CC189

NATURAL RESOURCES AGENCY

EDMUND G. BROWN JR., GOVERNOR

DEPARTMENT OF CONSERVATION

Managing California's Working Lands

Division of Oil, Gas, & Geothermal Resources

5075 SO. BRADLEY ROAD • SUITE 221 • SANTA MARIA, CALIFORNIA 93455

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

9N32W32L

April 4, 2011

William #1 32L

(b) (6)

34.810419 -120.26457

Re: Oil wells in the vicinity of [redacted]

Dear [redacted]

We have identified four wells in proximity to the subject property. None appear to actually be located on the property.

ERG Operating Company wells "W.P. Hammond Fee B (NCT-1)" 1 and 3 were plugged and abandoned to current standards in 2001.

Marland Oil Company well "Williams" 1 was plugged and abandoned in 1926, to the standards in effect at the time. It does not meet current standards. Cat Canyon Oil Company well "Williams B" 2 was plugged and abandoned in 1973, to the standards in effect at the time. It does not meet current standards. These wells are located downhill off the property.

Greka Oil & Gas, Inc. well "Preisker" 1 is presently idle. There has been no activity at this well since 1985, apart from required well testing to ensure there is no leakage or damage to groundwater

Please contact Ross Brunetti at 805 937-7246 if you have any questions.

Sincerely,

Patricia A. Abel
District Deputy

RB:cb

cc: Chrono

Santa Maria, California
December 27, 1926.

Mr. Hugh Martin, Agt.
Marland Oil Company
Box 626, Santa Maria,
California.

Dear Sir:

Your report of abandonment of Well No. Williams 1, Sec. 32, T. 9 N., R. 32 W., S. B. B. & M., Cat Canyon Oilfield, Santa Barbara County, dated December 17, 1926, and submitted to this department on our form 102, has been examined in conjunction with records filed in this office.

A review of the reports and records shows that the requirements of this department, which are based on all information filed with it, have now been fulfilled.

Yours truly,

R. D. BUSH
State Oil & Gas Supervisor

by R. E. McCabe
Deputy Supervisor

CC.--C. H. Beal
--W. F. McMurray
--C. P. Prewett

Marland Oil Co - Amoco Oil Co Apr 27, 1927
Amoco O. Co - Mullican Holding Co - March 22, 1927
Mullican Holding Co - Silver Oil Co - Apr 7, 1927
Silver Oil Co - [illegible]

42

TATE OF CALIFORNIA—RESOURCES AGENCY

EPARTMENT OF CONSERVATION

IVISION OF OIL AND GAS

11 WEST CHURCH STREET

ANTA MARIA, CALIFORNIA 93454

5/22/80

PK

If you are out in Cat Canyon some day, or if Bill is, please take a look at this well. Try to get the farmer's name and phone number.

5/-1/80

John: I visited the well site this well has evidently been covered over.

I asked some of the oil personel about the owner of the property and had no results in locating them.

GWL

41

OF CALIFORNIA—RESOURCES AGENCY

RONALD REAGAN, Governor

DEPARTMENT OF CONSERVATION
DIVISION OF OIL AND GAS
201 WEST CHURCH STREET, P. O. BOX 227
SANTA MARIA, CALIFORNIA 93454

June 1, 1973

Marland Oil Co

Re: Well No. "Williams B" 2 /
Sec. 32, T.9N., R.32W., S.B.B.& M.

WATER-DISPOSAL PROJECT
CAT CANYON FIELD
EAST AREA
S_4-S_5 SANDS

David W. Chenot, Agent
OCCIDENTAL PETROLEUM CORPORATION
5000 Stockdale Highway
Bakersfield, CA 93309

As injected water has channeled in the annulus in Marland Oil Company well No. "Williams B" 2 / additional well repair work must be done before injection may be resumed. This work would involve not only the repair of the Marland well, which was producing fresh water before the breakthrough, but also a review of cementing practices in all the wells within a one-half mile radius of the injection well, and the repair of those wells in which cement did not rise behind casing to at least 100 feet above the zone of injection. It appears that Carpenter Oil Company well No. 1 and Home-Stake Oil Company well No. "Williams" 1, both in Section 32, might be among the candidates for your analysis; there may be other wells for which we have no records.

Consideration should also be given to the feasibility of discontinuing this project along that boundary of the shallow depth of the zone, the presence of fresh water bearing strata, and the uncertainty about the presence and condition of old wells in the vicinity.

John L. Peterson
Deputy Supervisor

JLZ:MT

40

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

WATER WELL DRILLERS REPORT

WATER WELL DRILLERS REPORT

(Sections 7976, 7077, 7078, Water Code)

SHEET 1
San Barbara Co.
3

Do Not Fill In
State Well No. 9N/32W-32P1
Other Well No.
Region 3

(1) Driller:
Name Charles A. Shaw
Address Box 1806
Oxnard Calif.
License No. Classification

(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

Owner:
Name Mrs. H. A. McDonald
Address 3 S. W. 3rd
San Pedro Calif.

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

(5) Well log:
Total depth of well 212 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).

ft. to ft.

This is an old 15" oil well that was cleaned out and perforated (WILLIAMS NO. 1)

DIVISION OF OIL & GAS
RECEIVED
MAY 7 - 1951
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

39

D.W.R. Form No. 240

33971 3-50 40M QUIN SPO

.CATE
.iginal, Duplicate and Triplicate with the
.VISION OF WATER RESOURCES
P. O. BOX 1079
SACRAMENTO 5, CALIFORNIA

STATE OF CALIFORNIA
DEPARTMENT OF PUBLIC WORKS
DIVISION OF WATER RESOURCES

WATER WELL DRILLERS REPORT

(Sections 7076, 7077, 7078, Water Code)

SHEET 2

Do Not Fill In
State Well No. 9N/32W-32P1
Other Well No.
Region 3

(7) Perforations:
Type of perforator used Mills

Perforated	20 ft. to	50 ft.	Hole size	No. of holes	
"	20 " "	50 "	" "	" " "	
"	20 " "	40 "	" "	" " "	
"	40 " "	45 "	" "	" " "	

(8) Water levels:
Depth at which water first encountered ft.
Depth to water before perforating Dry ft.
Depth to water after perforating 28 ft.
Note any change in water level while drilling

(9) Well pumping test:
Date of test None 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
MAY 7 - 1951
SANTA MARIA, CALIFORNIA

(11) Location:

North

1 MILE

WILLIAMS No. 1
Section No. 32P
Township 9N
Range 32W
Base & Meridian
Show location of well in Section, thus (X)
Distances to section lines from well, N or S 1300 ft. and E or W 2330 ft.
Show location of nearest known well, thus (O)
Distance to nearest known well 680 ft.

(12) Time of work:
Work started date July 21-50 Completed date July 26-50
Date of this report July 28-50

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] Charles A. Shaw
Well Driller

By
License No. Classification
Dated July 28, 1950

38

D.W.R. FORM NO. 246

23873 2-50 40M QUIN SPO

CC of
Letter, May 14, 1932.

From - R. D. Bush, State Oil and Gas Supervisor,
To - Gilmore Oil Company, Ltd.,

Re CHANGE OF DESIGNATION of well No.
"WILLIAMS" 1 to "MARLAND" 1
Sec. 32, T. 9 N., R. 32 W., S. B. B. & M.

Filed on record of GILMORE OIL COMPANY, LTD.
Well No. "Fleisher" 1,
Sec. 30, T. 9 N., R. 32 W.,
S. B. B. & M.,
Cat Canyon oil field,
Santa Barbara County.

37

Letter, April 12, 1932,

From - S. G. Dolman, Deputy Supervisor,
To - R. D. Bush, State Oil and Gas Supervisor,

Re: CHANGE OF DESIGNATION of well No.

"Williams" 1, 32-9-32, S. B.,
to "Marland" 1

Filed on record of Gilmore Oil Co., Ltd.,
Well No. "Fleisher" 1, 30-9-32, S. B. B. & M., ~~("Williams"-1)~~
Cat Canyon oil field, ~~("Fletcher"-1)~~
Santa Barbara County.

36

9N 32W 32P CC190

*The free Adobe Reader may be used to view and complete this form. However, software must be purchased to complete, save, and reuse a saved form.

File Original with DWR 09N32W32

State of California

Well Completion Report

Refer to Instruction Pamphlet

No. e0117452

Page 1 of 1

Owner's Well Number 2

Date Work Began 09/13/2010 Date Work Ended 9/14/2010

Local Permit Agency Santa Barbara County

Permit Number SR107461 Permit Date 9/1/10

DWR Use Only – Do Not Fill In

State Well Number/Site Number

N W

Latitude Longitude

APN/TRS/Other

Geologic Log

Orientation ○ Vertical ○ Horizontal ○ Angle Specify

Drilling Method Drilling Fluid

Depth from Surface Feet	to Feet	Description (Describe material, grain size, color, etc)
0	18	Brown clay
18	23	Brown clay with some small gravel
23	45	Sandy brown clay
45	60	Brown clay
60	75	Sandy brown clay
75	90	Brown clay with gravel
90	105	Green Shale
		8 inch steel top tube

Total Depth of Boring 105 Feet

Total Depth of Completed Well 100 Feet

Well Owner

~~DAN32W32Q~~

Well Location

Address 6975 Cat Canyon Rd

City Santa Maria County Santa Barbara

Latitude 34 Deg. 48 Min. 40 Sec. N Longitude 120 Deg. 16 Min. 0 Sec. W

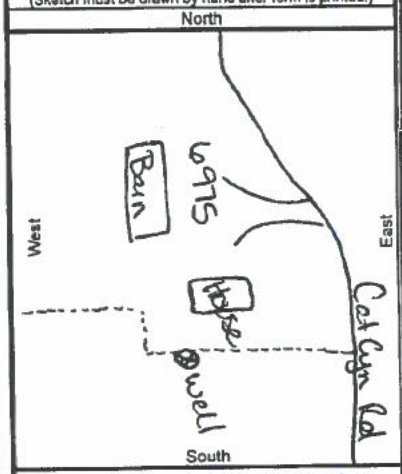
Datum Decimal Lat. Decimal Long.

APN Book 101 Page 070 Parcel 060

Township Range Section

Location Sketch

(Sketch must be drawn by hand after form is printed.)



Illustrate or describe distance of well from roads, buildings, fences, rivers, etc. and attach a map. Use additional paper if necessary. Please be accurate and complete.

Activity

- ◉ New Well
- ○ Modification/Repair
  - ○ Deepen
  - ○ Other
- ○ Destroy

Describe procedures and materials under "GEOLOGIC LOG"

Planned Uses

- ◉ Water Supply
  - ☑ Domestic ☐ Public
  - ☑ Irrigation ☐ Industrial
- ○ Cathodic Protection
- ○ Dewatering
- ○ Heat Exchange
- ○ Injection
- ○ Monitoring
- ○ Remediation
- ○ Sparging
- ○ Test Well
- ○ Vapor Extraction
- ○ Other

Water Level and Yield of Completed Well

Depth to first water (Feet below surface)

Depth to Static Water Level 43 (Feet) Date Measured 09/18/2010

Estimated Yield * 35 (GPM) Test Type

Test Length 24.0 (Hours) Total Drawdown 33 (Feet)

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

Casings

Depth from Surface Feet	to Feet	Borehole Diameter (Inches)	Type	Material	Wall Thickness (Inches)	Outside Diameter (Inches)	Screen Type	Slot Size If Any (Inches)
0	70	12.25	Blank	PVC	SDR21	6.6		
70	90	12.25		PVC	SDR21	6.6	HORIZ	0.032
90	100	12.25	Blank	PVC	SDR21	6.6		

Annular Material

Depth from Surface Feet	to Feet	Fill	Description
0	25	Concrete	
25	100		#8

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 A & A Pump and Well Service
Person, Firm or Corporation

123 Industrial Way Buellton CA 93427
Address City State Zip

Signed [signature] 9/21/10 577455
C-57 Licensed Water Well Contractor Date Signed C-57 License Number

DWR 188 REV 1/2006

IF ADDITIONAL SPACE IS NEEDED, USE NEXT CONSECUTIVELY NUMBERED FORM

09/28/10

9N 32W 33

9N 32W 33C

CC191

34 49 05.63 120 15' 17.27

Permit No. 102151

Page 1 of 2 pages

WELL PERMIT APPLICATION

Well #2

TO: Environmental Health Division
Santa Barbara County Health Care Services

Date 6/16/01

Name of Well Owner Bill Miller

Mailing Address P.O. Box 1812 Santa Maria CA 93456
Street, P.O. City State Zip Code Telephone

Well Site Location: Vicinity Map Attached ☐ (Check)

Assessor's Parcel No. 101-070-49 Street Address Cat Cyn & Long Cyn.

Township _____ Range _____ Section _____ Rancho _____

Name of Well Driller Ron Taylor Drilling

Company Name Ron Taylor Drilling

Business Address 2801 Mahoney Rd S.M. CA. Date of Work

Contractor's License No. C57-523858 Start 6/16/01 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 265 ft.

Well Bore Diam 10 in.

Casing Information

Type: Steel ☐ PVC ☒ Other ☐

Wall/Gage ____ in.

Diameter 5 in.

Annular Seal Depth 20 ft.

Sealing Material (Check)

Neat Cement ☐ Clay ☐

Cement Grout ☐ Concrete ☐

RECEIVED
JUN 18 2001
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 Ron Taylor 6/16/01
Applicant

44862

$328 Fee paid on 6/18/01

Receipt No. 638305

Paid By: R. Taylor

Name

Date 6/18/01

S.B. ☐ Sol. ☐

S.M. ☒ Lom ☐

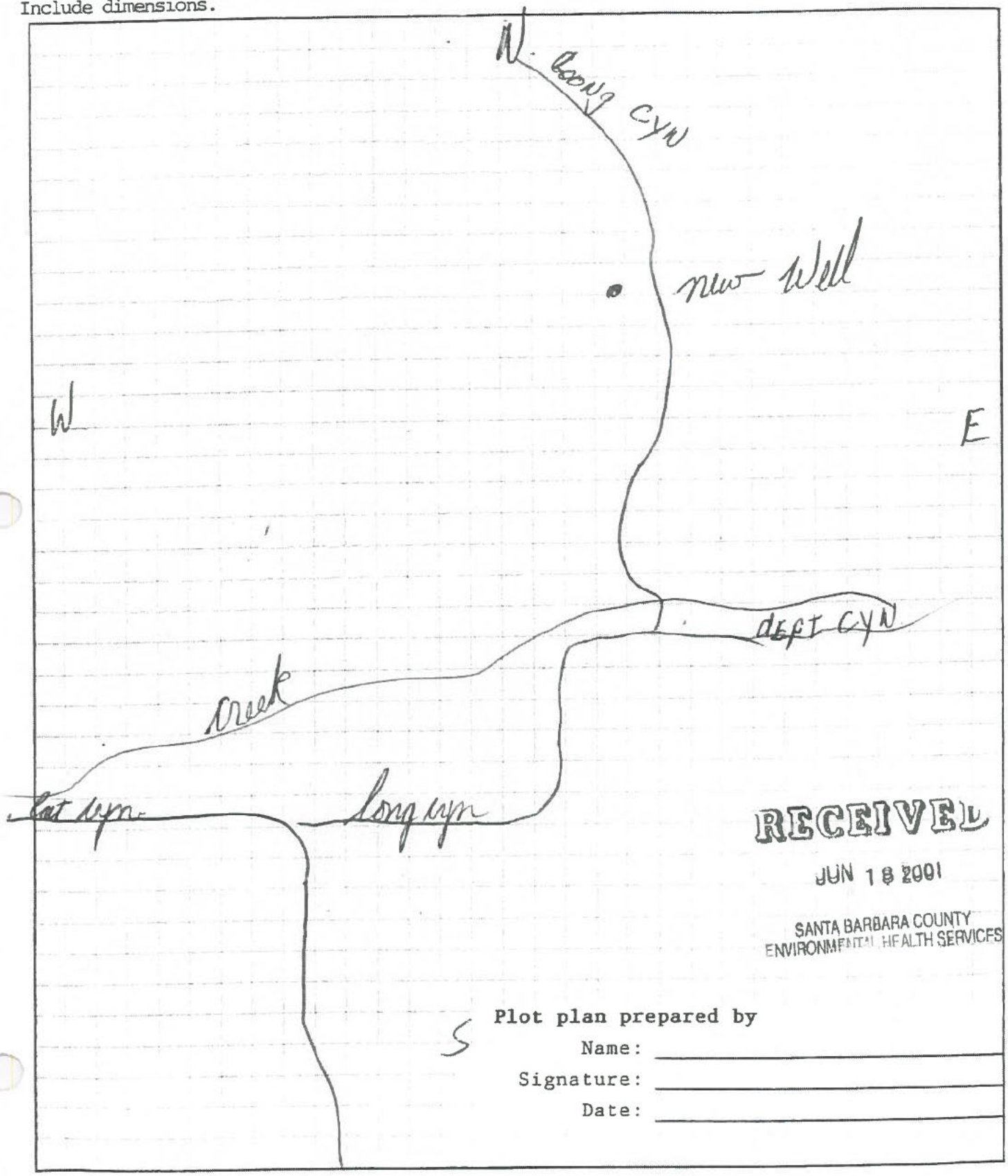
WHEN SIGNED BY HEALTH CARE SERVICES, THIS APPLICATION IS A PERMIT. HEALTH OFFICER SHALL BE NOTIFIED PRIOR TO ALL SEALING OPERATIONS. NOTE: PERMIT EXPIRES ONE YEAR FROM DATE ISSUED.

WELL PERMIT APPLICATION

Plot Plan (½" = 20')

Permit No. 102151
Page 2 of 2

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.



RECEIVED
JUN 18 2001
SANTA BARBARA COUNTY
ENVIRONMENTAL HEALTH SERVICES

Plot plan prepared by

Name: _____

Signature: _____

Date: _____

101-070-049

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 Heroux, MPA *Director*
Tara Brown, MBA *Assistant Director*
Elliot Schulman, MD, MPH *Health Officer/Medical Director*

June 19, 2001

Bill Miller
P.O. Box 1812
Santa Maria, CA

Subject: **Completion Report for Water Well Permit #102151 (Assessor's Parcel Number: 101-070-049)**

Dear Mr. Miller

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

PC: Assessor's Office

4N/32W - 33D
CC192

ORIGINAL
File with DWR

Page 1 of 1

Owner's Well No. _____

Date Work Began 9/4/91, Ended 9/6/91

Local Permit Agency Santa Barbara

Permit No 8958 Permit Date 7/26/91

STATE OF CALIFORNIA
WELL COMPLETION REPORT
Refer to Instruction Pamphlet

No. 478608

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	Sandy Top Soil
3	65	Brown Sand Some Small Gravel
65	74	Sandy Light Brown Clay
74	110	Sand & Gravel
110	125	Sandy Brown Clay
125	205	Sand & Gravel
205	232	Yellow Green Sandy Clay
232	260	Volcanic Sand & Clay Stringer
260	295	Yellow Sand Some Gravel Shale
295	300	Brown Clay
300	305	Sand & Gravel
305	310	Brown Sandy Clay
310	345	Sand & Gravel Some Clay Stringers
345	368	Sand & Gravel Some Clay Stringers
368	400	Yellow Brown Sandy Clay
400	440	Blue Sand & Silty Clay
		GM

TOTAL DEPTH OF BORING 440 (Feet)

TOTAL DEPTH OF COMPLETED WELL 400 (Feet)

WELL OWNER

33D

Name

Mailing Adc

CITY STATE ZIP

WELL LOCATION

Address

City APN: 101-070-46

County

APN Book ___ Page ___ Parcel ___

Township 9N Range 32W Section 33

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

LOCATION SKETCH

NORTH

34 49 4.60
120 15 30.71

WEST EAST

SOUTH

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 Rotary FLUID Bentonite

WATER LEVEL & YIELD OF COMPLETED WELL

DEPTH OF STATIC WATER LEVEL 370 (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)
0	240		X				PVC	6	SDR 21	.040
240	440		Perf				PVC	6	SDR 21	.040

ANNULAR MATERIAL

DEPTH FROM SURFACE Ft.	to Ft.	TYPE CEMENT (✓)	BENTONITE (✓)	FILL (✓)	FILTER PACK (TYPE/SIZE)
0	50	X			
50	440		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
(PERSON, FIRM, OR CORPORATION) (TYPED OR PRINTED)

ADDRESS P.O. Box 845 CITY Atascadero STATE CA ZIP 93423

Signed [signature] (WELL DRILLER/AUTHORIZED REPRESENTATIVE) DATE SIGNED 9/7/91 C-57 LICENSE NUMBER 432680

DWR 188 REV. 7-90

IF ADDITIONAL SPACE IS NEEDED, USE NEXT CONSECUTIVELY NUMBERED FORM

9N 32W 33G

101-070-029 CC193

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. **316874**

Notice of Intent No. _____
Local Permit No. or Date #8852

APN # 101-070-29

State Well No. _____
Other Well No. _____

(1) OWNER: (b) (6) [redacted]
Address _____
City Sant

(2) LOCATION OF WELL (See instructions):
County Santa Barbara Owner's Well Number 1
Well address if different from above _____
Township 8S9N Range 32 Section 933W
Distance from cities, roads, railroads, fences, etc. _____

34 48' 54.85
120 14' 54.50"

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 Monterey
Diameter of bore 12¼
Packed from 20 317 ft.

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

From ft.	To ft.	Dia. in.	Gage or Wall
317	0	6	SDR21

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

From ft.	To ft.	Slot size
100	317	40

(9) WELL SEAL:
Was surface sanitary seal provided? Yes ☒ No ☐ If yes, to depth 20 ft.
Were strata sealed against pollution? Yes ☐ No ☐ Interval _____ ft.
Method of sealing _____

(10) WATER LEVELS:
Depth of first water, if known _____ ft.
Standing level after well completion 142 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 399 ft. Completed depth 317 ft.

from ft.	to	ft. Formation (Describe by color, character, size or material)
0	-	20 sand and gravel
20	-	50 sand with clay
50	-	75 white sdand and gravel
75	-	80 blue clay
80	-	85 sand with clay
85	-	125 coarse sand
125	-	180 brown hard sand
180	-	399 gray sand

Work started 11/6 19 90 Completed 11/9 1990

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 _____ (Person, firm, or corporation) (Typed or printed)
Address 3201 Thousand Oaks
City Los Angeles CA ZIP 90035
License No. 657 523 A54 Date of this report 11/9/90

CONFIDENTIAL
NOT FOR PUBLIC USE
WATER CODE SEC. 13752

IF ADDITIONAL SPACE IS NEEDED, USE NEXT CONSECUTIVELY NUMBERED FORM

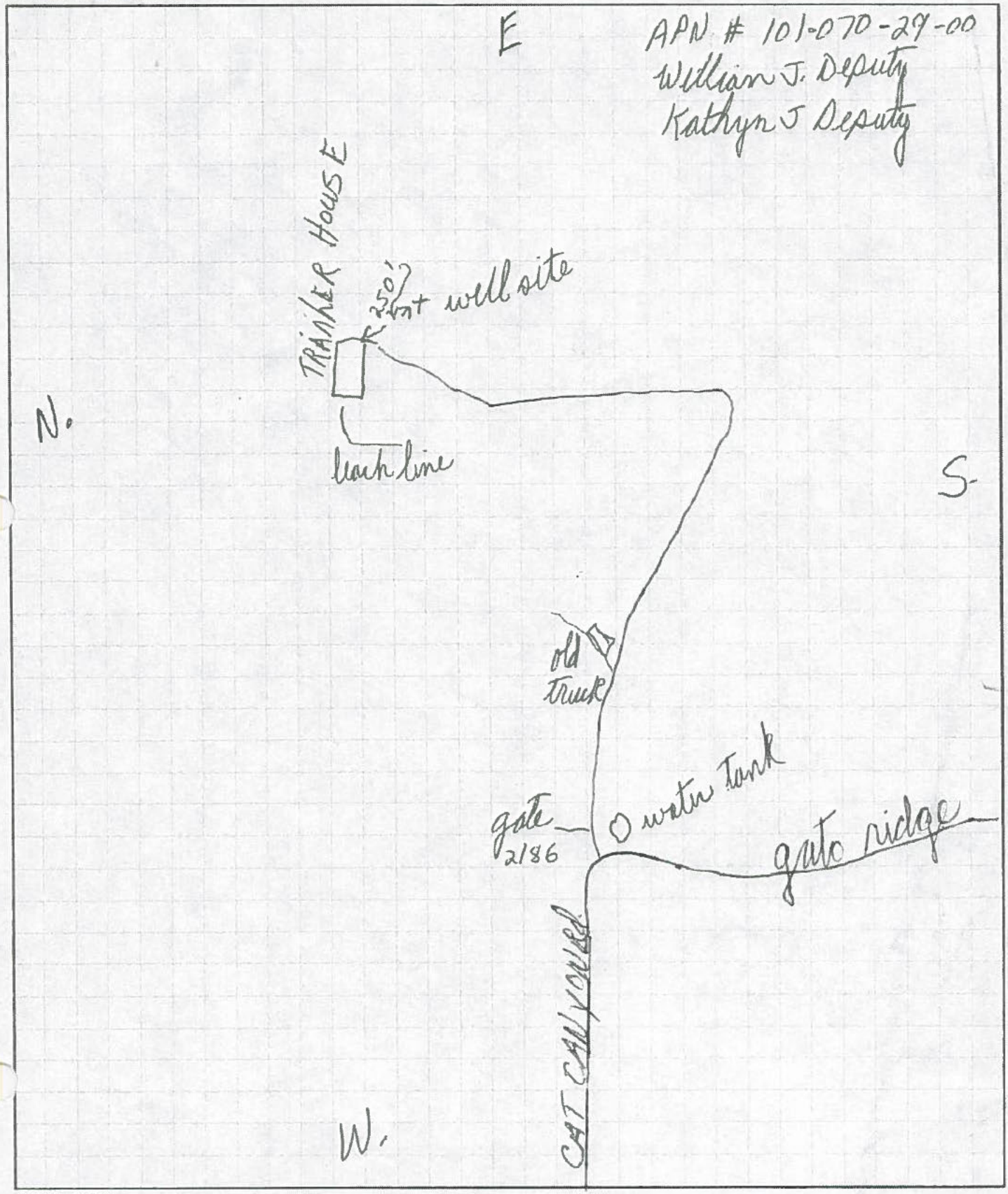
DWR 188 (REV. 12-86) 86 96355

WELL PERMIT APPLICATION

Plot Plan (¼" = 20')

Permit No. 8852
Page 2 of 2
APN # 101-070-27

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

COUNTY OF SANTA BARBARA • HEALTH CARE SERVICES

315 CAMINO DEL REMEDIO • SANTA BARBARA, CALIFORNIA 93110 • (805) 681-5200

LAWRENCE HART, M.D., F.A.C.P.M.
DIRECTOR AND HEALTH OFFICER

November 28,1990

(b) (6)

Subject: Well Completion Report

Water Well Permit Number: 8852

Address: Cat Canyon Road/Gato Ridge

A.P.#: 101-070-29

This Department has reviewed the construction of the water well located on the subject property and has determined said work to have been performed in compliance with the requirements of the Well Drilling Ordinance, Chapter 34-A of the Santa Barbara County Ordinance, and the well construction is complete.

Please be advised that if you intend to use this well to supply domestic water, it will be necessary for you to meet the requirements of Chapter 34-B of the Code, including, but not limited to: pump testing, chemical analysis and water system design approval prior to construction. A copy of the water system ordinance is enclosed for your review.

Application forms and information for water system permits are available from Environmental Health Services Division. The Building Official will require that you obtain a permit for the water system prior to issuance of building permits.

If you have any questions concerning this matter, please contact me at 934-6223.

Sincerely,

Lawrence Hart, M.D.
Director and Health Officer

Henry S. Ruiz
Environmental Health Inspector

CC: Assessor's Office
Resource Management

COMPLETION.HSR.
07-90

BRANCH OFFICES

☒ 500 West Foster Rd.
Santa Maria, CA 93455
(805) 934-6223

☐ 751-B East Burton Mesa
Lompoc, CA 93436
(805) 737-7744

Permit No. 8852
Page ___ of ___ pages
APN # 101-070-29

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

Well Permit Application Received: Date 11 1 6 190

Site Investigation By A. Ruiz Date 11 1 7 190

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 w/ Assessors office - No land use concerns

Application Reviewed and Approved: By [signature] Date 11 17 190

Work Investigation Record

Date 11 19 190

Well Site #: ____

Casing Information

Type: Steel ☐ PVC ☒ Other ☐ ____

Class/Gage/NSF: ____

ASTM#: SDR 21 F 480

Diameter: 6" Total Depth: 317

Casing Schedule

0'	- 100'	=	BLANK
100'	- 317'	=	PERF
	-	=	
	-	=	
	-	=	
	-	=	
	-	=	

Borehole

Total Depth of Well: 317 ft.

Annular Seal Depth: 20 ft

Well Bore Diameter: 12 1/2

Sealing Material: Concrete

Amount: 1 yd.

Method of Pour: Gravity

Use of Tremie: No

Driller(s): Ron Taylor

Comments: 6" PVC Cap on Site

Final Inspection and Approval/Denial: By [signature] Date 11 19 190

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

W-320P Rev. 12/89

FROM 805 346 8485 01.01.2080 01:00 P.

9N 32W 33K

CC194

34 48' 40.94 120 15' 12.23"

Permit No. [redacted]

Page 1 of 2 pages

WELL PERMIT APPLICATION

TO: Environmental Health Division
Santa Barbara County Health Care Services

Date 12 / 11 / 95

Name of Well Owner [redacted]

Mailing Address 350 [redacted]

Zip Code Telephone

Well Site Location: Vicinity Map Attached ☒ (Check)

Assessor's Parcel No. 101-070-53 Street Address Cat Cyn

Township _____ Range _____ Section _____ Rancho _____

Name of Well Driller Enloe Well Drilling Doug Enloe

Company Name Enloe Well Drilling

Business Address 2285 Willow Road Arroyo Grande ca. 93420

Contractor's License No. 318877

Date of Work Start 12/12/95 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 100 ft.

Well Bore Diam 10 in.

Casing Information

Type: Steel ☒ PVC ☐ Other ☐

Wall/Gage ½ 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 [signature] Applicant 12/12/95

$450 Fee paid on 12/12/95

Receipt No. X1356211

Paid By: Driller

Name [signature]

Date 12/26/95

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 STAGING OFF...

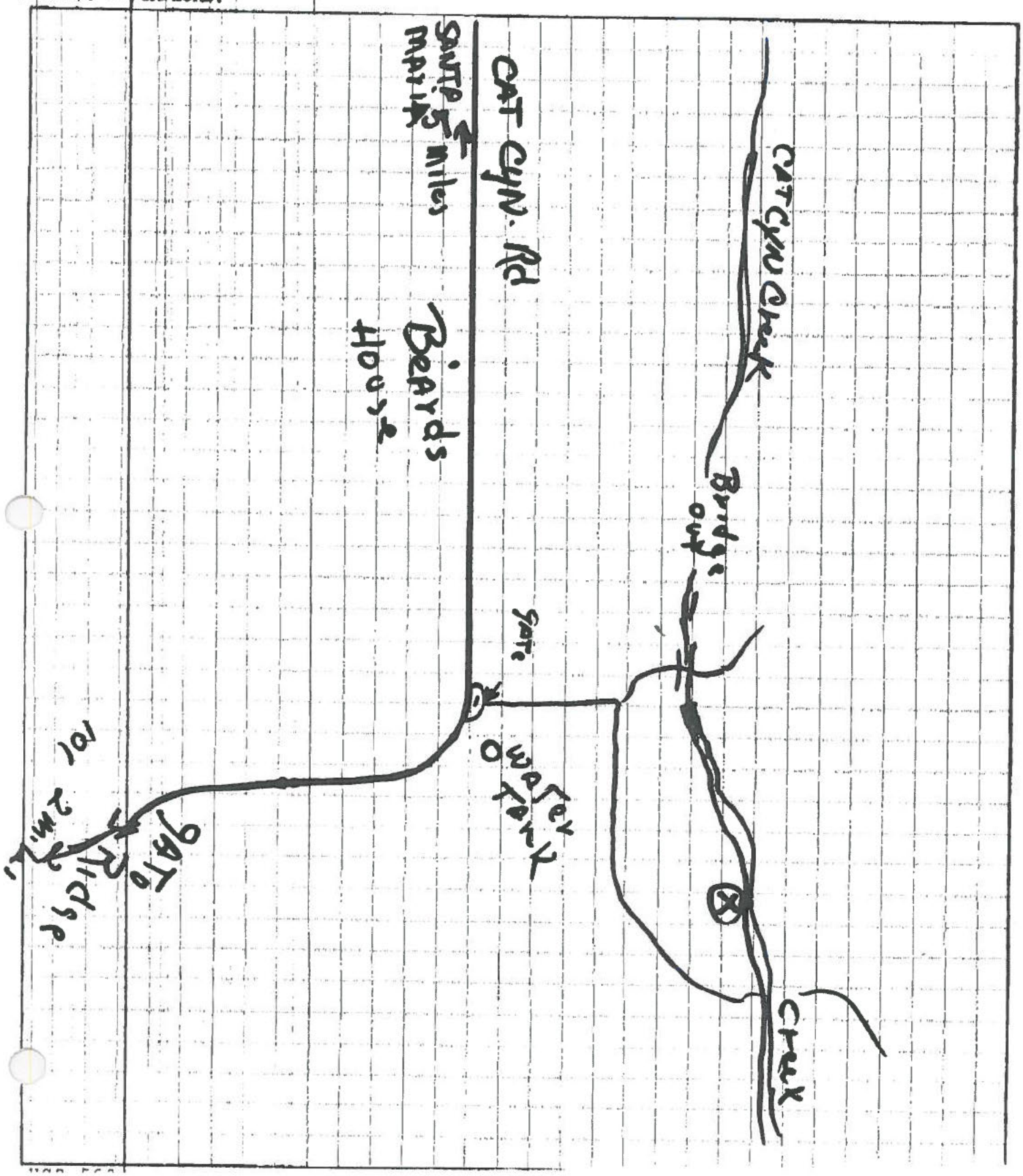
34° 48' 41.04" 120°, 15' 12.09"

WELL PERMIT APPLICATION

Plot Plan (¼" = 20')

Permit No. 460
Page 2 of 2

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.



101-070-053

Santa Barbara County
Health Care Services

COUNTY OF SANTA BARBARA • HEALTH CARE SERVICES

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

Steven A. Escoboza
Director

Roger E. Heroux
Assistant Director

Elliot Schulman, M.D.
Health Officer

(b) (6)

Dear Ms. Filburg:

Subject: **Completion Report for Water Well Permit #460**
(Assessor's Parcel Number 101-070-53)

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,

Paul Jenzen, R.E.H.S.
Environmental Health Specialist

PJ:jrt
J:\..\CH\WCOMPLETION.LTR
PC: Assessor's Office

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

Well Permit Application Received: Date 12 / 12 / 95

Site Investigation By Paul Jenzer Date 12 / 20 / 95

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

MEETS ALL APPLICABLE SETBACK REQUIREMENTS

Application Reviewed and Approved: By Paul Jenzer Date 12/20/95

Work Investigation Record

Date 3/21/96

Well Site #:

Casing Information

Type: Steel ☒ PVC ☐ Other ☐

Class/Gage/NSF: .188

ASTM#:

Diameter: 6" Total Depth: 100

Casing Schedule

0' - 80' = BLANK
80 - 100 = PERFORATED

Borehole

Total Depth of Well: 100

Annular Seal Depth: 20'

Well Bore Diameter: 10"

Sealing Material: 5½ SACK

Amount: ± 2 YARDS

Method of Pour: GRAVITY

Use of Tremie: —

Driller(s): Doug ENLOE

Comments: CABLE TOOL WELL., CAPPED DURING SEAL

Final Inspection and Approval/Denial: By Paul Jenzer Date 3/21/96

Notice of Work Acceptance/Rejection Sent to Well owner On 3/25/96

W-320P Rev. 12/89

9N 32W 33L 101-070-026 CC195

Office of Joseph E Holland County Clerk, Recorder, Assessor

Assessor's Office - Property Details 101-070-026

- Search
  - APN Situs
  - Deed Situs
- Reports
  - Sales
  - Secured Roll
  - Unsecured Roll

<< < 2009 601 > >> < 101-070-026 > on 01/01/2009 Reduction in Value (Sect. 51) on Lien Date

Owner: LACOUNT, DAVID M

Hide History

Owner Name	Assessee Code	Total Benf %
LACOUNT, DAVID M	Primary assessee/owner	50.00 %
LACOUNT, JACQUELINE L	Assessee/owner 2	50.00 %

Situs: 7040 LONG CANYON RD LOS ALAMOS 93454 9632

History

Value	History
Land	$340,000
Structures	$100,000
Living Improv	$0
Trade Fix	$0
Imp. Subtotal	$100,000
PP Declared	$0
Unit Value	$0
Mobil Home	$0
PP Subtotal	$0
Value (Gross)	$440,000
HO Xmps	$0
Other Xmps	$0
Value (Net)	$440,000

Mailing Address	History
5406 DEL NORTE WAY	
SANTA MARIA CA 93455	

APN Characteristics			
Use Code:	5823 - Proper improvement, 10-20 acres		
TRA:	055-013	Acreage:	10.44
Non Tax Code:		Ag Preserve ID:	
Jurisdiction:	County - Unincorporated	Parcel Map	Aerial Map

Deeds/Events APN History

Recorded & Non-recorded Docs:

Doc Number	Doc Date	Doc Type	Pcor Status	Event Date	Trans. %	Reapr. %	Recorded Amt	Trans Reappraisable Status
2010-025677	05/14/2010	GDEE	U	05/14/2010	100.00 %	0.00 %	$9,639,000	
2005-008134	01/28/2005	DEED	N	01/28/2005	0.00 %	0.00 %	$0	Non-reappraisable
2004-103408	09/28/2004	DEED	P	09/28/2004	100.00 %	100.00 %	$350,000	Reappraisable
2004-041569	04/23/2004	DEED	Y	04/23/2004	100.00 %	100.00 %	$630,000	Reappraisable
1999-077519	09/24/1999	DEE		09/24/1999	100.00 %	100.00 %	$1,255,000	old code: Reassessable transfer - with owner change report
1997-035381	06/20/1997	DEE	N	06/20/1997	100.00 %	0.00 %	$0	Non-reappraisable
1990-018344	03/20/1990	DEE	N	03/20/1990	100.00 %	0.00 %	$0	Non-reappraisable, Interfamily transfer
	03/01/1975	P13		03/01/1975	100.00 %	100.00 %		Reappraisable

12

Pending Docs:

Doc Number	Doc Date	Doc Type	Event Date	Recorded Amt	APN Verification Status
2010-025677	05/14/2010	GDEE	05/14/2010	$9,639,000	Added in APS

Permits:

Permit #	Permit Date	Proposed NC Date	Completion Date	Category	Agency
4BDP01925	04/01/2005		07/05/2005	Mobile Home Install / Accessories	Santa Maria - County

Disaster Events:

34 48 35.56 120 15' 20.39"

This service has been provided to allow access of County Assessor's public information. Every reasonable effort has been made to ensure the accuracy of the data provided, nevertheless, some information may not be accurate. The County of Santa Barbara Office of the Clerk-Recorder-Assessor assumes no responsibility arising from outside use of this information. THE DATA IS PROVIDED WITHOUT WARRANTY OF ANY KIND, either expressed or implied, including but not limited to, the implied warranties of merchantability and fitness for a particular purpose. Please contact the appropriate office if you have any questions or concerns.

Permit No. 23

WELL PERMIT APPLICATION

TO: Environmental Health Division
Santa Barbara County Health Care Services

Date 7 / 29 / 93

Name of Well Owner FELBERG FAMILY TRUST C/O NORMAN TARDIF

Mailing Address 239 ROSS ST., SANTA CRUZ, CA 95060
Street, P.O. | City | State | Zip Code | Telephone

Well Site Location: Vicinity Map Attached ☑ (Check) 18 Long Cyn

*Assessor's Parcel No. 101-070-26 Street Address CAT CYN RD. & LONG CYN RD.

Township 9N Range 32W Section 33 Rancho

Name of Well Driller MIKE ALEXANDER

Company Name ALEXANDER BROS.

Business Address 200 LA SALLE CYN. RD., LOMPOC 93436 Date of Work

Contractor's License No. C57-350699 Start 8/ /93 Finish 8/ /93

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 150 ft.

Well Bore Diam 12 in.

Casing Information

Type: Steel ☐ PVC ☑ Other ☐

Wall/Gage NA 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 Contact this dept with 24 hours notice to 80 by press pouring seal.

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 Charles E Katzenmeyer, AGENT R.G. #4069 Applicant 7/29/93

$450 Fee paid on 7/2/93

Receipt No. 12/10406

PAID BY: [illegible]

Name Dana M. Pierno

Date 8-4-93

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.

Data Entry 7/93 RO

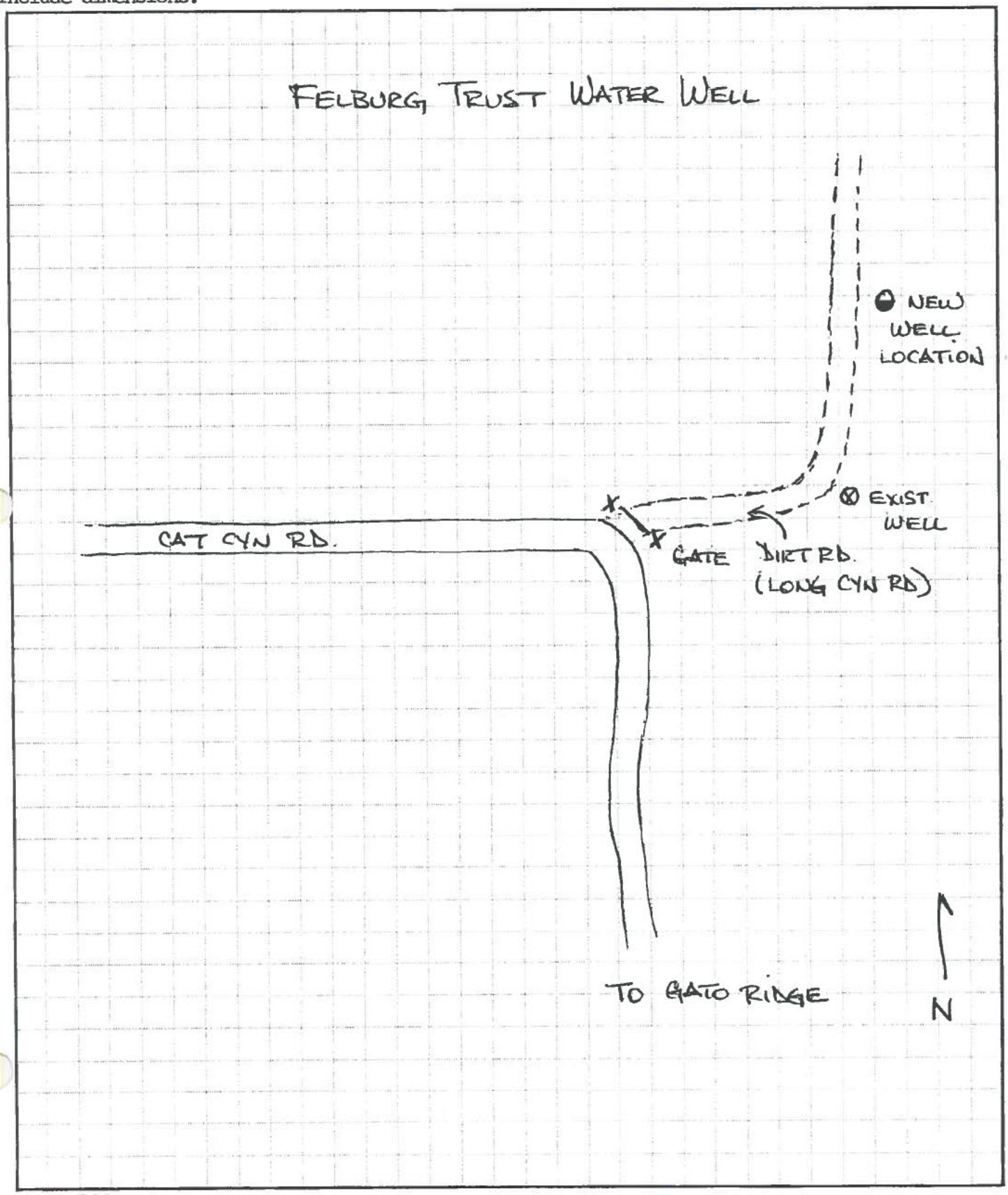
H-96 Rev. 6-84

WELL PERMIT APPLICATION

Plot Plan (¼" = 20')

Permit No._____
Page 2 of 2

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

CAT CANYON
CAT CANYON OIL FIELD
Long Canyon
Olivera Canyon
PRIVATE
CAT CANYON ROAD
WELLSITE
T9N
T8N
R32W
R31W
Airway Beacon
ABM 1617
GATO RIDGE OIL FIELD
Gato Ridge
TINAQUAIC
24
19
20
21
25
30
29
28
36
31
32
33
6
5
4

COUNTY OF SANTA BARBARA

OFFICE MEMORANDUM

To FILE

Date 8-7-75

From DAVID PIERCE

In re ON SITE FIELD CONFERENCE W/ B. FELBERG / GATO RIDGE.

ATTACHED IS A COPY OF THE 12/72 CHEMICAL ANALYSIS OF THE WATER SERVING FELBERG PROPERTY OCCUPIED BY FOX FAMILY. DISCUSSION OF SOURCE DISTRIB SYSTEM ETC. - CONCLUSION HAZARDOUS INDUSTRIAL WATER NOT SUITABLE FOR ANY USE IN A DOMESTIC RESIDENCE.

FOX FAMILY WILL VOLUNTARILY VACATE THE LOCATION AS SOON AS POSSIBLE AND THE STRUCTURE WILL NOT BE USED FOR HUMAN HABITATION AGAIN According to MRS. FELBERG.

FOX FAMILY WILL KEEP US ADVISED OF PROGRESS.

ORAL messages waste your time and the time of the other person; they often cause annoying interruptions and are apt to be misunderstood or forgotten. *Put it in writing.*

Location see map w/ #4 at top of Cat Canyon

Owned by Growers of

BRIGGS LEMON
FILLMORE-PIRU CITRUS
GOLETA LEMON
MUPU CITRUS

OJAI-TAPO CITRUS
OXNARD CITRUS
SANTA BARBARA LEMON
SANTA CLARA LEMON

SANTA PAULA CITRUS
SANTA PAULA ORANGE
SATICOY LEMON
SEABOARD LEMON

Fruit Growers Laboratory, Inc.

P. O. BOX 272 – 243 STECKEL DRIVE – PHONE (805) 525-5714

Santa Paula, California 93060

December 26, 1972
Lab. No. 26322-4

(b) (6)

RE: GATO RIDGE #4 WATER SAMPLE

Reporting Lab. No. 26322-4 a water sample received and described as "Gato Ridge #4, sampled December 17, 1972 by R.A.F."

At the time the laboratory received this sample it had a slightly amber color. Insofar as laboratory personnel did not collect this sample, we will assumeno responsibility as to the accuracy of sampling, but must consider it as representative of the source from which it was taken.

The analysis has been presented on the attached sheet, values expressed as milligram equivalents per liter (ME./l), as parts per million (PPM), and pounds per acre foot (PAF). Hardness is in the conventional term of grains per gallon (GPG), while the total solids residue on evaporation have been reported as milligrams per liter (mg./liter).

Sheets are attached which permit evaluation of this water as an irrigation source and also interpret some of the terms used.

CONCLUSIONS

1). Lab. No. 26322-4 contained a total dissolved solids concentration of 925 PPM.

2). The water is considered to be a class #2 irrigation source, use it with a reasonable degree of safety on a wide range of crops.

3). The mineral composition of the water is such that it meetsthe present regulations on domestic water supplies as adopted by the State Department of Public Health, September 2, 1972.

4). Iron present at 0.17 PPM and manganese at less than 0.05 PPM. Iron present at this concentration may prove a little troublesome in domestic use, in that it tends to stain laundry and porcelain fixtures.

5). Total hardness 27.1 GPG.

In the event there are questions regarding any of these analyses, please feel free to call or write.

Very truly yours,
FRUIT GROWERS LABORATORY, INC.

Edward J. Curran, Jr.

EJC:jc
cc: 2
Attachments

Fruit Growers Laboratory, Inc.

P. O. BOX 272 – SANTA PAULA, CALIFORNIA 93060 – PHONE 525-5714

WATER ANALYSIS REPORT

OWNER – Robert A. Felburg

SAMPLER – R.A.F.

LAB. NO. – 26322-4

DATE SUBMITTED – December 18, 1972

ANALYSIS REPORTED – December 22, 1972

MATERIAL Gato Ridge #4 Sampled: 12/17/72

	MILLIGRAM EQUIVALENTS PER LITER	PARTS PER MILLION	LBS. PER ACRE FOOT	%
Calcium (Ca)	5.53	111	301	40.5
Magnesium (Mg)	3.76	46	124	27.6
Sodium (Na)	4.35	100	272	31.9
Potassium (K)				
Carbonate (CO_3)	none			
Bicarbonate (HCO_3)	3.45	210	573	25.0
Chloride (Cl)	3.10	110	299	22.5
Sulphate (SO_4)	7.25	348	947	52.5
Nitrate (NO_3)	Trace			
TOTAL SOLIDS (Dissolved)		925	2519	

Total solids (residue) 950 mg/liter. @ 103°C

Boron ppm	0.3
Fluoride ppm	0.5
Iron ppm	0.17
Manganese ppm	less than 0.05
pH	7.4
EC X 10-6 at 25° C	1280

HARDNESS Grains Per Gallon (as Ca CO3)	
Calcium	16.1
Magnesium	11.0
Total Hardness	27.1
Temporary Hardness	10.1
Permanent Hardness	17.0

CHEMIST Darrell H. Nelson

Darrell H. Nelson

Owned by
BRIGGS LEMON
FILLMORE CITRUS
GOLETA LEMON
LIMONEIRA COMPANY
MUPU CITRUS
OJAI-TAPO CITRUS
OXNARD-SANTA CLARA LEMON
RANCHO SESPE
SEABOARD LEMON
SANTA BARBARA LEMON
SANTA MARIA CITRUS
SANTA PAULA ORANGE
SATICOY LEMON

Fruit Growers Laboratory, Inc.

P. O. BOX 272 — 243 STECKEL DRIVE — PHONE (805) 525-5714

Santa Paula, California 93060

December 26, 1972
Lab. No. 26322-2

(b) (6)

RE: DUTRA #2 WATER SAMPLE

Presenting Lab. No. 26322-2, a water sample received and described as "Dutra #2, sampled December 17, 1972 by R.A.F."

Insofar as laboratory personnel did not collect this sample, we will assume no responsibility as to the accuracy of sampling, but must consider it as representative of the source from which it was taken.

The analysis is presented on the attached sheet and values expressed as milligram equivalents per liter (M.E./l), parts per million (PPM), and pounds per acre foot (PAF). The total solids residue on evaporation at 103° C have been reported as milligrams per liter (mg./liter), while hardness is in the conventional term of grains pergallon (GPG).

Attached are sheets which permit evaluation of the water as an irrigation source and also interpret some of the terms used herein.

CONCLUSIONS

1). Lab. No. 26322-2 contained a total dissolved solids concentration of 1017 PPM and a total solids residue on evaporation of 965 mg./liter.

2). The mineral composition of this water is such that it meets the present regulations on domestic water supplies as adopted by the State Board of Public Health, September 2, 1972.

3). The water is regarded as a Class #2 irrigation source, demerited slightly on the basis of chlorides which are present at 169 PPM.

4). Total hardness 24.1 GPG.

Very truly yours,
FRUIT GROWERS LABORATORY, INC.

Edward J. Curran, Jr.

EJC:jc
cc: 2
Attachments

Fruit Growers Laboratory, Inc.

P. O. BOX 272 – SANTA PAULA, CALIFORNIA 93060 – PHONE 525-5714

WATER ANALYSIS REPORT

OWNER – Robert A. Felburg

SAMPLER – R.A.F.

LAB. NO. – 26322-2

DATE SUBMITTED – December 18, 1972

ANALYSIS REPORTED – December 22, 1972

MATERIAL Dutra #2 Sampled: 12/17/72

	MILLIGRAM EQUIVALENTS PER LITER	PARTS PER MILLION	LBS. PER ACRE FOOT	%
Calcium (Ca)	5.16	103	281	34.4
Magnesium (Mg)	3.09	38	102	20.6
Sodium (Na)	6.74	155	422	45.0
Potassium (K)				
Carbonate (CO_3)	none			
Bicarbonate (HCO_3)	5.22	318	866	35.4
Chloride (Cl)	4.75	169	460	32.2
Sulphate (SO_4)	4.50	216	588	30.4
Nitrate (NO_3)	0.29	18	49	2.0
TOTAL SOLIDS (Dissolved)		1017	2768	

Total solids (residue).....965.....mg/liter@ 103° C

Boron	ppm	0.4
Fluoride	ppm	0.5
Iron	ppm	less than 0.1
Manganese	ppm	less than 0.05
pH		7.4
EC X 10-6 at 25° C		1512

	HARDNESS Grains Per Gallon (as Ca CO3)
Calcium	15.1
Magnesium	9.0
Total Hardness	24.1
Temporary Hardness	15.2
Permanent Hardness	8.9

CHEMIST Darrell H. Nelson

2715 EAST 37TH STREET, LOS ANGELES, CALIFORNIA 90058 • (213) 582-0701

ANALYTICAL & CONSULTING CHEMISTS & BACTERIOLOGISTS

CABLE ADDRESS. DAYCOUNT

LABORATORY NO. [redacted] 5/1/70

FOR

SAMPLE 4/24/70

MARKS #2 (ULTRA WELL GATO RIDGE)

BASED ON SAMPLE As submitted

WATER ANALYSIS

Electrical Conductivity	1,515	pH	7.6
	epm		ppm
Calcium (Ca)	5.50		110
Magnesium (Mg)	3.60		44
Sodium (Na)	6.30		145
Potassium (K)	0.048		1.8
Total Cations	15.45		
Carbonate (CO_3)	--------		--------
Bicarbonate (HCO_3)	5.50		335
Sulfate (SO_4)	5.23		251
Chloride (Cl)	4.78		170
Nitrate (NO_3)	0.28		17
Fluoride (F)			0.40
Total Anions	15.79		
Boron (B)			None detected
Silica (SiO_2)			38
Total Dissolved Solids			1,045
Hardness			455

Coliform (Most Probable Number)------ 38 per 100 ml.

Sodium (Na)---------- 40%

DAYLE LABORATORIES, INC.

HENRY M. ESPOY

RECEIVED

JUN 1 1970

As a mutual protection to clients, the public and ourselves, all reports are submitted as the confidential property of clients, and authorization for publication of statements, conclusions or extracts from or regarding our reports is reserved, pending our written approval.

9/29/75.

LONG CANYON & CAT CANYON CORNER

9-32-33M - USGS.

DUTRA WELL

REHAB - ? open casing
small wooden storage

agric. only -

09N 32W 33M01

CA.	Mg	Na	K.	HCO_3	CO_3	SO_4	Cl	F	NO_3	B.
110	43	150	2.8	318	0	232	182	.3	31	170

TDS	SPEC. Cond.
970	1470.

120.28 ft. in 1961 — 99 FT in 1967

LSD 745 ft. above MSL.

Highest water level 60.71 Below LSD Oct. 15, 1970

Lowest water level 64.98 " " March 18, 1971

Records. 1961, 1966-1973

DATE	water level
Oct. 15, 1970	60.71
March 18, 1971	64.98
Sept. 15, 1971	65.50

Date	Water level
March 14, 1972	61.93
April 7, 1973	62.35

9N/32W-33N4

Permit No. [illegible]

Page 1 of ___ pages

CC196

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

Well Permit Application Received: Date 2, 23, 2007

Site Investigation By J. Davies Date 2, 26, 2007

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 2, 26, 07

Work Investigation Record

Date 5, 6, 2008

Well Site #: 1

Casing Information

Type: Steel ☐ PVC ☒ Other ☐ ____

Class/Gage/NSF: SDR21

ASTM#: F-480

Diameter: 5" Total Depth: 114'

Casing Schedule

0'	54'	=	Blank
54	114	=	Screen
		=	
		=	
		=	
		=	
		=	

Borehole

Total Depth of Well: 114'

Annular Seal Depth: 30'

Well Bore Diameter: 7 7/8"

Sealing Material: 6 sack cement

Amount:

Method of Pour: Gravity

Use of Tremie: No

Driller(s): Ron Taylor Drilling

Comments: Production casing capped this date

Final Inspection and Approval/Denial: By J. Davies Date 5, 6, 08

Notice of Work Acceptance/Rejection Sent to Well owner On 5, 7, 08

W-320P Rev. 12/89

Santa Barbara County
PUBLIC Health
DEPARTMENT

Environmental Health Services

225 Camino Del Remedio • Santa Barbara, CA 93110
805/681-4900 • FAX 805/681-4901

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

Elliot Schulman, MD, MPH *Director/ Health Officer*
Anne M. Fosron *Deputy Director*
Suzanne Jacobson, CPA *Deputy Director*
Michele Micklewicz, MPH *Deputy Director*
Jane Overbaugh *Deputy Director*

May 7, 2008

(b) (6) [redacted]

Subject: **Completion Report for Water Well Permit # SR0104850 (Assessor's Parcel Number: 101-070-071 Cat Canyon, Santa Maria CA 93454)**

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 require 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 System 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, REHS
Environmental Health Specialist

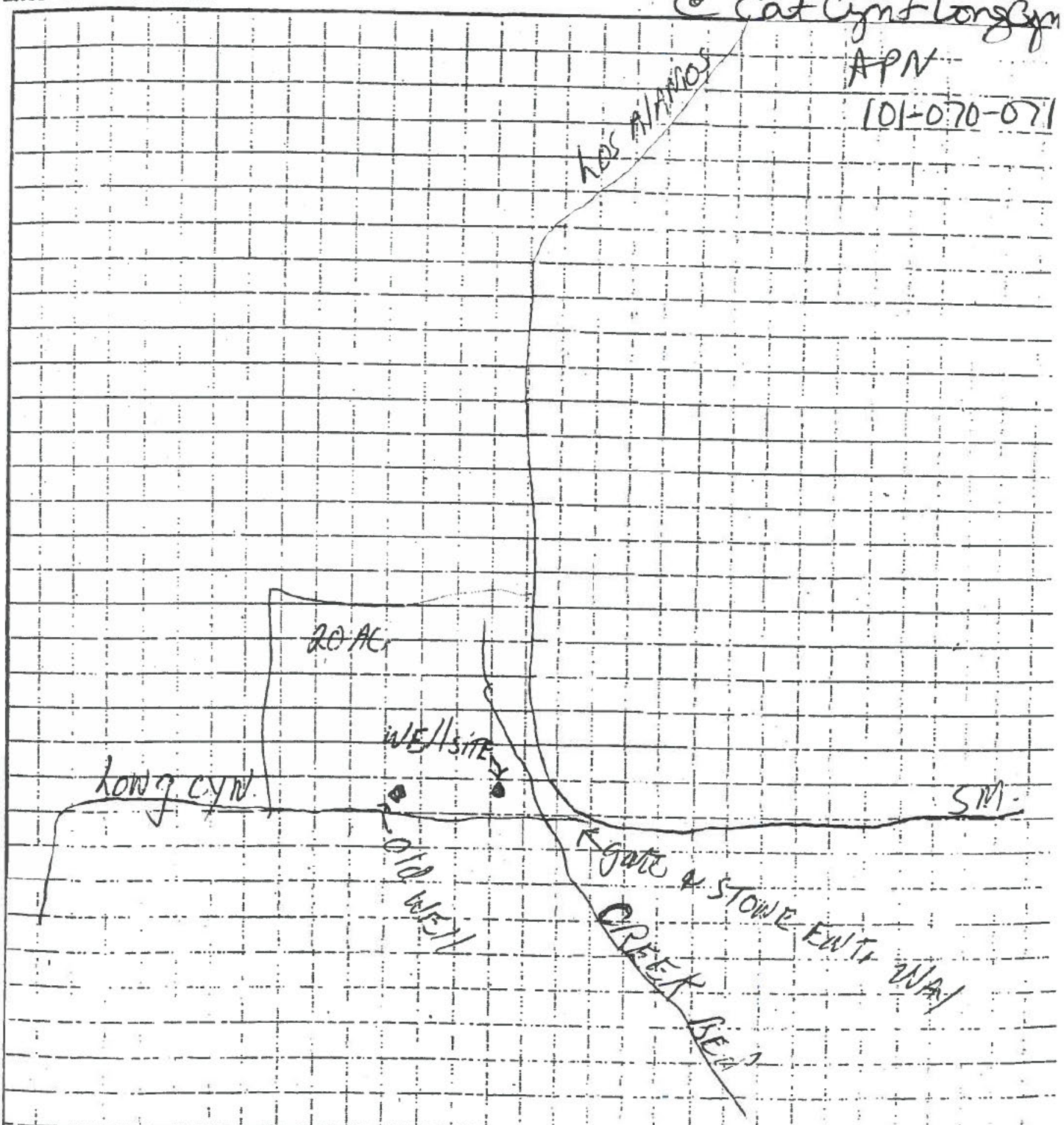
PC: Assessor's Office

WELL PERMIT APPLICATION

Permit No. _____

Plot Plan (¼" = 20') SR0104850

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 eleva Include dimensions.



Plot plan prepared by

Name: _____

Signature: _____

Date: _____

✓ **ORIGINAL**
File with DWR

9N32W33N

STATE OF CALIFORNIA
WELL COMPLETION REPORT
Refer to Instruction Pamphlet

CC316

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

Page 1 of 1
Owner's Well No. 1
No. 1079306
Date Work Began 6/22/05, Ended 6/27/05
Local Permit Agency Santa Barbara County EHS
Permit No. 0103830 Permit Date 6/15/05

GEOLOGIC LOG

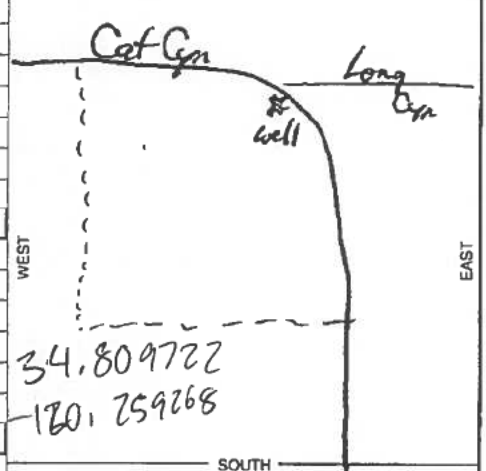
ORIENTATION (✓) X VERTICAL ___ HORIZONTAL ___ ANGLE ___ (SPECIFY)
DRILLING METHOD _____ FLUID _____

DEPTH FROM SURFACE Ft.	to Ft.	DESCRIPTION *Describe material, grain size, color, etc.*
0	56	brn soil clay
56	88	sand with some gravel
88	145	clay some gravel

TOTAL DEPTH OF BORING 145 (Feet)
TOTAL DEPTH OF COMPLETED WELL 140 (Feet)

WELL OWNER
Nam[redacted]
Mai[redacted]
CITY STATE ZIP

WELL LOCATION
Address Cat Cyn
City Los Alamos, Ca.
County Santa Barbara
APN Book 101 Page 070 Parcel 066
Township 09N Range 32W Section 33
Lat 34 DEG. 48 MIN. 591 SEC. N Long 120 DEG. 15 MIN. 554 SEC. W

LOCATION SKETCH
NORTH


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 _____ (Ft.) BELOW SURFACE
DEPTH OF STATIC WATER LEVEL 52 (Ft.) & DATE MEASURED 6/27/05
ESTIMATED YIELD * 20 (GPM) & TEST TYPE pump
TEST LENGTH 24 (Hrs.) TOTAL DRAWDOWN 61 (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	40	12¼	x				PVC	6	c1200	.032
40	140	12¼		x			PVC	6	c1200	.032

ANNULAR MATERIAL

DEPTH FROM SURFACE Ft.	to Ft.	TYPE CE-MENT (✓)	BEN-TONITE (✓)	FILL (✓)	FILTER PACK (TYPE/SIZE)
0	35	x			
35	145			x	3/8 pea

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

CERTIFICATION STATEMENT
[redacted] knowledge and belief.
[redacted] CITY STATE ZIP
9/4/05 753623
DATE SIGNED C-57 LICENSE NUMBER

DWR 188 REV. 05-03 IF ADDITIONAL SPACE IS NEEDED, USE NEXT CONSECUTIVELY NUMBERED FORM OSP 03 76836

USGS 344835 120152701

CC197

*The free Adobe Reader may be used to view and complete this form. However, software must be purchased to complete, save, and reuse a saved form.

File Original with DWR 09N 32W33

State of California

Well Completion Report

Refer to Instruction Pamphlet

No. e0098202

Page 1 of 1

Owner's Well Number #3

Date Work Began 09/01/2009 Date Work Ended 9/10/2009

Local Permit Agency Santa Barbara County Environmental Health Departmnent

Permit Number SR0106697 Permit Date 8/27/09

DWR Use Only – Do Not Fill In

State Well Number/Site Number

N W

Latitude Longitude

APN/TRS/Other

Geologic Log

Orientation ⊙ Vertical ○ Horizontal ○ Angle Specify

Drilling Method Direct Rotary Drilling Fluid Bentonite

Depth from Surface Feet	to Feet	Description (Describe material, grain size, color, etc)
0	2	Top soil
2	105	Brown clay with streaks of coarse broken shale
105	205	Grey silty clay, slow consistent drilling rate
205	206	Dark grey shale, rough/slow drilling
206	285	Grey silty clay
285	356	Firm grey silt with streaks of rough drilling
356	357	Streak of rough/slow drilling black shale
357	375	Grey silty clay; good penatration rate
375	376	Black and red shale streak, rough drilling
376	420	Grey silty clay

Total Depth of Boring 420 Feet

Total Depth of Completed Well 420 Feet

Well Owner

3391

Well Location

Address 7075 Cat Canyon Rd. / Long Canyon Rd.

City Santa Maria County Santa Barbara

Latitude 34 Deg. 48 Min 35 Sec. N Longitude -120 Deg. 15 Min. 21 Sec. W

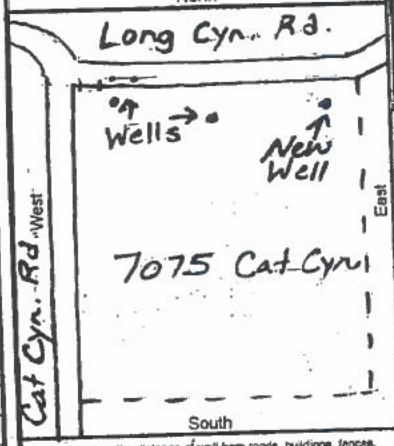
Datum NAD27 Decimal Lat. 34.809540 Decimal Long. -120.2688

APN Book Page Parcel

Township Range Section

Location Sketch

(Sketch must be drawn by hand after form is printed.)



Illustrate or describe distance of well from roads, buildings, fences, rivers, etc. and attach a map. Use additional paper if necessary. Please be accurate and complete.

Activity

⊙ New Well

○ Modification/Repair

○ Deepen

○ Other

○ Destroy

Describe procedures and materials under "GEOLOGIC LOG"

Planned Uses

⊙ Water Supply

☑ Domestic ☐ Public

☑ Irrigation ☐ Industrial

○ Cathodic Protection

○ Dewatering

○ Heat Exchange

○ Injection

○ Monitoring

○ Remediation

○ Sparging

○ Test Well

○ Vapor Extraction

○ Other

Water Level and Yield of Completed Well

Depth to first water 40 (Feet below surface)

Depth to Static Water Level 40 (Feet) Date Measured 09/10/2009

Estimated Yield * 40 (GPM) Test Type Air Lift

Test Length 4.0 (Hours) Total Drawdown (Feet)

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

Casings

Depth from Surface Feet	to Feet	Borehole Diameter (Inches)	Type	Material	Wall Thickness (Inches)	Outside Diameter (Inches)	Screen Type	Slot Size If Any (Inches)
0	80	9 7/8"	Blank	PVC Sch. 80	SDR 21	5 5/8"		
80	140	9 7/8"	Screen	PVC Sch. 80	SDR 21	5 5/8"	Milled Slots	0.032
140	240	9 7/8"	Blank	PVC Sch. 80	SDR 21	5 5/8"		
240	280	9 7/8"	Screen	PVC Sch. 80	SDR 21	5 5/8"	Milled Slots	0.032
280	380	9 7/8"	Blank	PVC Sch. 80	SDR 21	5 5/8"		
380	420	9 7/8"	Screen	PVC Sch. 80	SDR 21	5 5/8"	Milled Slots	0.032

Annular Material

Depth from Surface Feet	to Feet	Fill	Description
0	40	Cement	Sanitary Seal
40	420	Filter Pack	Gravel pack 1/4"x#5

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 John L. McCalip (Person, Firm or Corporation)

555 East Clark Ave. (Address) Orcutt (City) CA (State) 93455 (Zip)

Signed (C-57 Licensed Water Well Contractor) 09/15/2009 (Date Signed) 909097 (C-57 License Number)

IF ADDITIONAL SPACE IS NEEDED, USE NEXT CONSECUTIVELY NUMBERED FORM

DWR 188 REV. 1/2006

10/14/09

CC198

ORIGINAL
File with DWR

Page 1 of 1

Owner's Well No. 05-1

Date Work Began 6/28/05, Ended 7/1/05

Local Permit Agency Santa Barbara County EHS

Permit No. unknown obtained by Clay Properties Permit Date

STATE OF CALIFORNIA
WELL COMPLETION REPORT
Refer to Instruction Pamphlet

No. 1079307

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

338-2

GEOLOGIC LOG

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

DRILLING METHOD rotary FLUID air/mud

DEPTH FROM SURFACE Ft.	to Ft.	DESCRIPTION *Describe material, grain size, color, etc.*
0	42	soil and clay
42	50	sand gravel clay
50	54	clay
54	90	sand gravel clay
90	100	brn shale

TOTAL DEPTH OF BORING 100 (Feet)

TOTAL DEPTH OF COMPLETED WELL 97 (Feet)

WELL OWNER

WELL LOCATION

Address Cat Cyn

City Los Alamos, Ca.

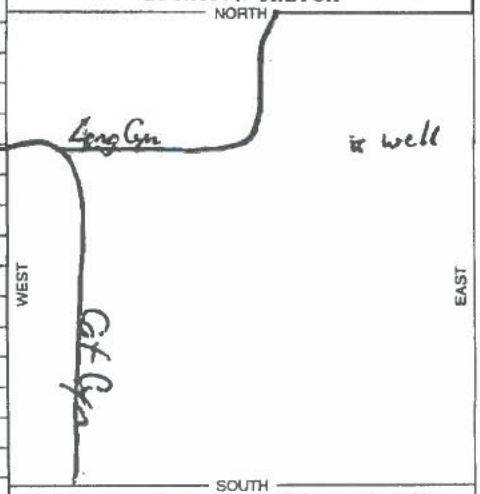
County Santa Barbara

APN Book ___ Page ___ Parcel ___

Township 09 N Range 32 W Section 33

Lat. 34 48 570 N (DEG MIN SEC) Long. 120 15 263 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
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 ___ (Ft.) & DATE MEASURED ___

ESTIMATED YIELD * 2 (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)
0	57	12¼	x				PVC	6	c1200	
57	97	12¼		x			PVC	6	c1200	.020

ANNULAR MATERIAL

DEPTH FROM SURFACE Ft.	to Ft.	TYPE: CEMENT (✓)	BENTONITE (✓)	FILL (✓)	FILTER PACK (TYPE/SIZE)
0	34	x			
34	100			x	moterey

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 Santa Ynez Pump & Drilling
(PERSON, FIRM, OR CORPORATION) (TYPED OR PRINTED)

ADDRESS P.O.Box 593 CITY Los Olivos, Ca. STATE 93441 ZIP

Signed Michael Alexander
C-57 LICENSED WATER WELL CONTRACTOR

DATE SIGNED 9/4/05

C-57 LICENSE NUMBER 753623

DWR 188 REV. 05-03

IF ADDITIONAL SPACE IS NEEDED, USE NEXT CONSECUTIVELY NUMBERED FORM

OSP 03 78636

Address diff location 09N 32W 32K2 CC199

ORIGINAL 09N 32W33
File with DWR

Page 1 of 1

Owner's Well No. 2

Date Work Began 5/30/06, Ended 6/1/06

Local Permit Agency Santa Barbara County EHS

Permit No. 0104346 Permit Date 4/24/06

STATE OF CALIFORNIA
WELL COMPLETION REPORT
Refer to Instruction Pamphlet
No. 1079321

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 ___

DEPTH FROM SURFACE Ft.	to Ft.	DESCRIPTION *Describe material, grain size, color, etc.*
0	25	brn clay sand gravel
25	55	dark brn clay gravel sand
55	65	brn clay shale

TOTAL DEPTH OF BORING 65 (Feet)

TOTAL DEPTH OF COMPLETED WELL 65 (Feet)

WELL OWNER

WELL LOCATION

Address 7171 Foxen Cyn Rd Section 27

City Santa Maria, Ca. 93454

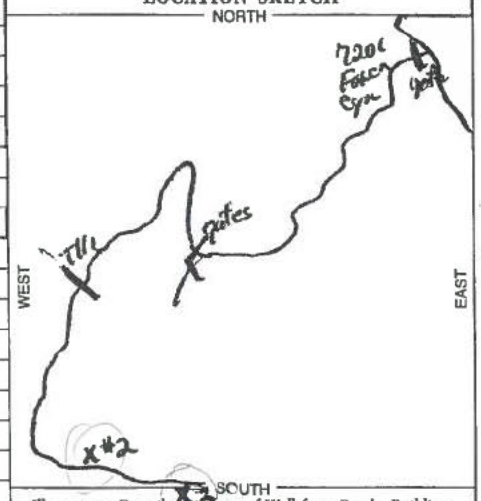
County Santa Barbara

APN Book 101 Page 070 Parcel 067 ?

Township ___ Range ___ Section ___

Lat 34 DEG. 48 MIN. 438 SEC. N Long 120 DEG. 14 MIN. 990 SEC. W

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 N/A (Ft.) BELOW SURFACE

DEPTH OF STATIC WATER LEVEL N/A (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)
0	35	12	x				PVC	6	c1200	
35	65	12		x			PVC	6	c1200	.020

ANNULAR MATERIAL

DEPTH FROM SURFACE Ft.	to Ft.	TYPE CEMENT (✓)	BENTONITE (✓)	FILL (✓)	FILTER PACK (TYPE/SIZE)
0	32	x			
32	65			x	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 Santa Ynez Pump & Drilling
(PERSON, FIRM, OR CORPORATION) (TYPED OR PRINTED)

ADDRESS P.O.Box 593 CITY Los Olivos, Ca. STATE 93441 ZIP

Signed Michael Alexander
C-57 LICENSED WATER WELL CONTRACTOR

DATE SIGNED 6/11/06

C-57 LICENSE NUMBER 753623

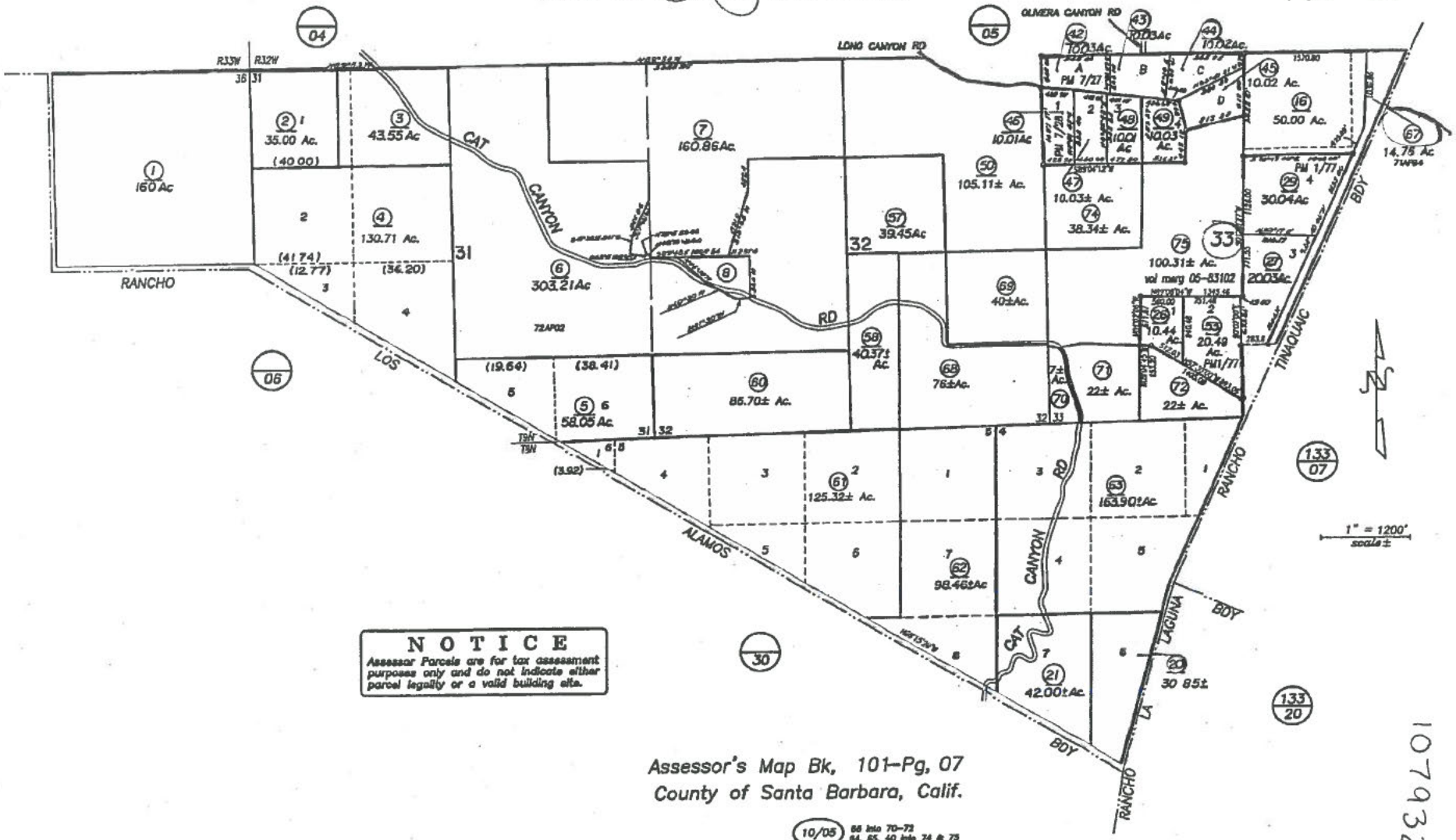
DWR 188 REV. 05-03

IF ADDITIONAL SPACE IS NEEDED, USE NEXT CONSECUTIVELY NUMBERED FORM

OSP 03 78836

POR. T8-9N R32-33W SBB&M

101-07



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, 07
County of Santa Barbara, Calif.

10/05 66 into 70-73
64, 65, 40 into 74 & 75

1079321

Address diff location 32R3 CC200.

09N32W33

ORIGINAL
File with DWR

Page 1 of 1
Owner's Well No. 3
Date Work Began 5/31/06, Ended 6/1/06
Local Permit Agency Santa Barbara County EHS
Permit No. 0104414 Permit Date 6/1/06

STATE OF CALIFORNIA
WELL COMPLETION REPORT
Refer to Instruction Pamphlet
No. 1079322

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

DEPTH FROM SURFACE Ft.	to Ft.	DESCRIPTION *Describe material, grain size, color, etc.*
0	20	brn clay
20	23	sand and gravel
23	35	sand
35	41	clay some sand gravel
41	50	sandy clay
50	51	hard
51	60	shale brn

TOTAL DEPTH OF BORING 60 (Feet)
TOTAL DEPTH OF COMPLETED WELL 60 (Feet)

WELL OWNER

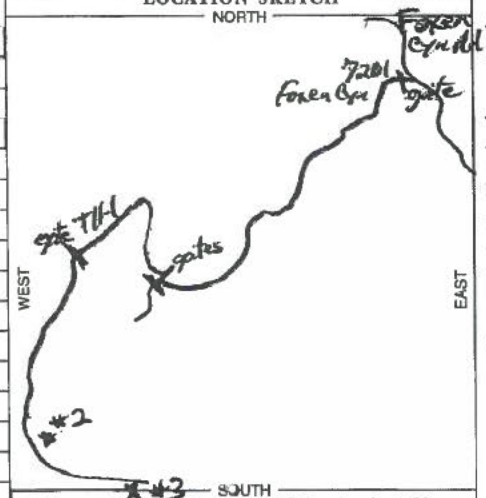
33R

WELL LOCATION

Section 27

Address 7171 Foxen Cyn Rd
City Santa Maria Ca. 93454
County Santa Barbara
APN Book 1010 Page 070 Parcel 067
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
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 N/A (Ft.) BELOW SURFACE
DEPTH OF STATIC WATER LEVEL N/A (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)
0	30	12	x				PVC	6	c1200	
30	60	12		x			PVC	6	c1200	.020

ANNULAR MATERIAL

DEPTH FROM SURFACE Ft.	to Ft.	TYPE CE-MENT (✓)	BEN-TONITE (✓)	FILL (✓)	FILTER PACK (TYPE/SIZE)
0	24	x			
24	60			x	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 Samta Ynez Pump & Drilling
(PERSON, FIRM, OR CORPORATION) (TYPED OR PRINTED)

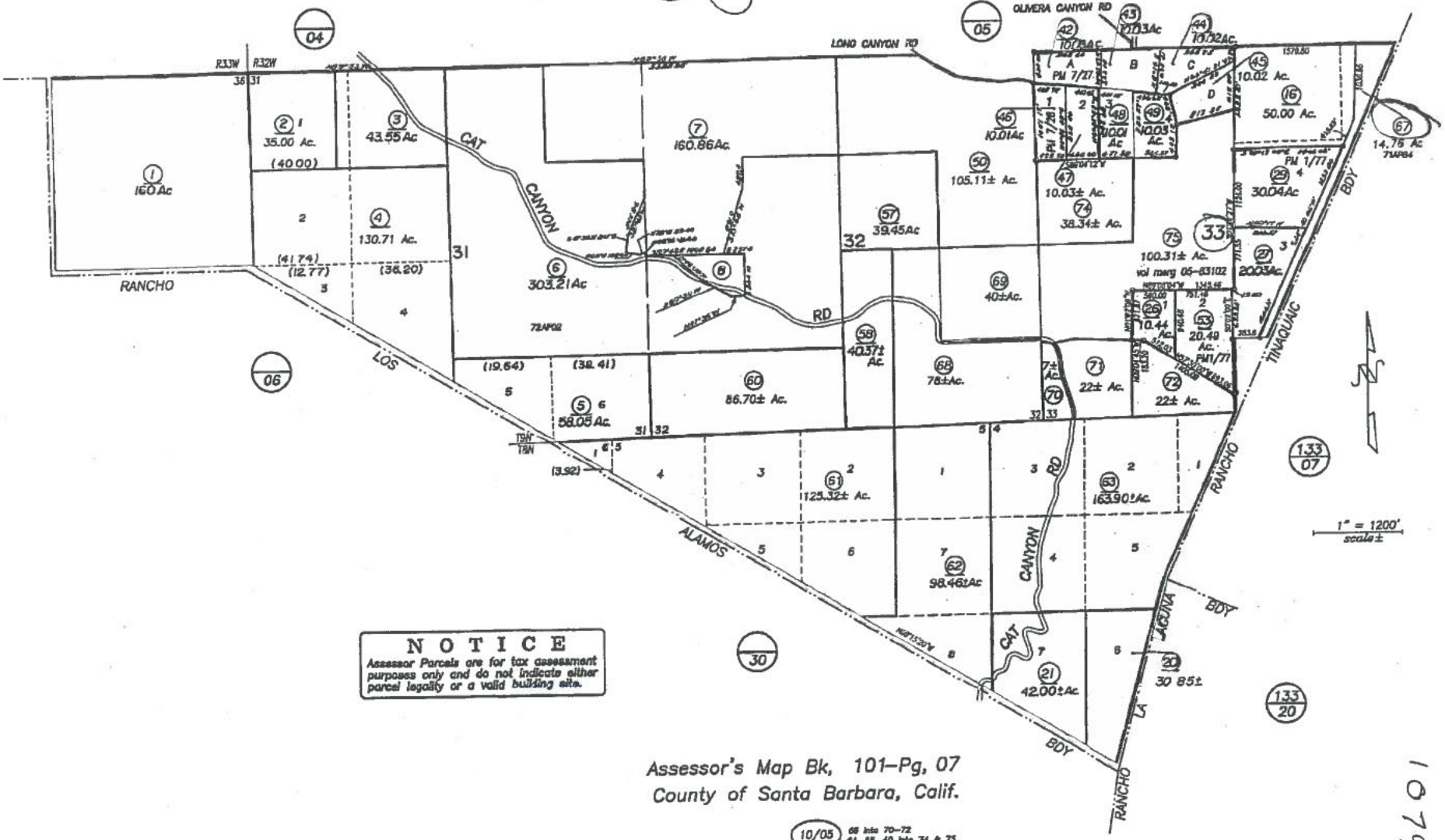
ADDRESS P.O.Box 593 CITY Los Olivos, STATE Ca. ZIP 93441

Signed Michael Alexander
C-57 LICENSED WATER WELL CONTRACTOR
DATE SIGNED 6/11/06
C-57 LICENSE NUMBER 753623

IF ADDITIONAL SPACE IS NEEDED, USE NEXT CONSECUTIVELY NUMBERED FORM

POR. T8-9N R32-33W SBB&M

101-07



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, 07
County of Santa Barbara, Calif.

10/05 68 into 70-72
64, 65, 40 into 74 & 75

9N 32W 34

ORIGINAL 09N 32W 34 — 9N 32W 34A — CC201
File with DWR

Page 1 of 1

STATE OF CALIFORNIA
WELL COMPLETION REPORT
Refer to Instruction Pamphlet

No. E063602

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 2/11/2008, Ended 2/12/2008
Local Permit Agency Santa Barbara County
Permit No. SR # 0105311 Permit Date 11/26/2007

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	SILTY TOPSOIL
3	45	BROWN SAND SOME SHALE GRAVELS
45	55	BROWN SAND
55	77	FINE GREY SAND SOME THIN SILTY LAYERS
77	78	VERY HARD SANDSTONE
78	110	GREY GREEN SAND WITH TIGHT THIN SILTY LAYERS
110	200	SANDY SILTY GREEN CLAY
		The Air Lift Test is only approximate. A Test Pump is recommended for an accurate account. (GM)

TOTAL DEPTH OF BORING 200 (Feet)
TOTAL DEPTH OF COMPLETED WELL 150 (Feet)

WELL OWNER

34 49' 9.90" 120 13' 46.99"

WELL LOCATION

Address 7600 Foxen Canyon Road
City Santa Maria CA
County Santa Barbara
APN Book 133 Page 070 Parcel 039
Township ____ Range ____ Section ____
Latitude ____ DEG. MIN. SEC. ____ 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 50 (Ft.) & DATE MEASURED 2/12/2008
ESTIMATED YIELD * 1 (GPM) & TEST TYPE Air Lift
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	CONDUCTOR	FILL PIPE	MATERIAL / GRADE	INTERNAL DIAMETER (Inches)	GAUGE OR WALL THICKNESS	SLOT SIZE IF ANY (Inches)
0	25	12	✓				F-480 PVC	5	SDR 21	
25	150	12		✓			F-480 PVC	5	SDR 21	.040

ANNULAR MATERIAL

DEPTH FROM SURFACE Ft.	to Ft.	TYPE CEMENT (✓)	BENTONITE (✓)	FILL (✓)	FILTER PACK (TYPE/SIZE)
0	20	✓			
20	200			✓	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 CITY ATASCADERO STATE CA ZIP 93423

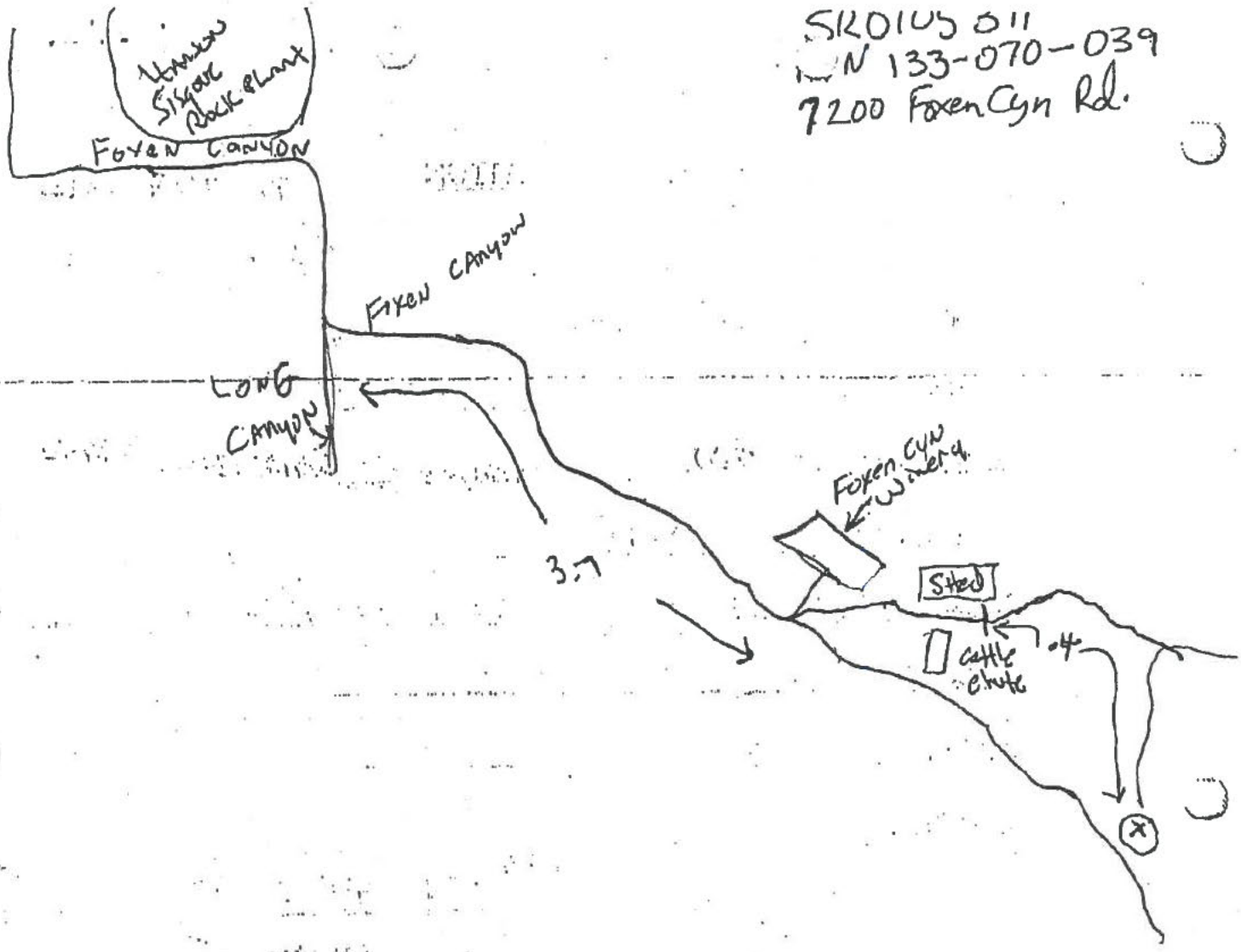
Signed [signature] WELL DRILLER/AUTHORIZED REPRESENTATIVE DATE SIGNED 02/13/08 C-57 LICENSE NUMBER 432680

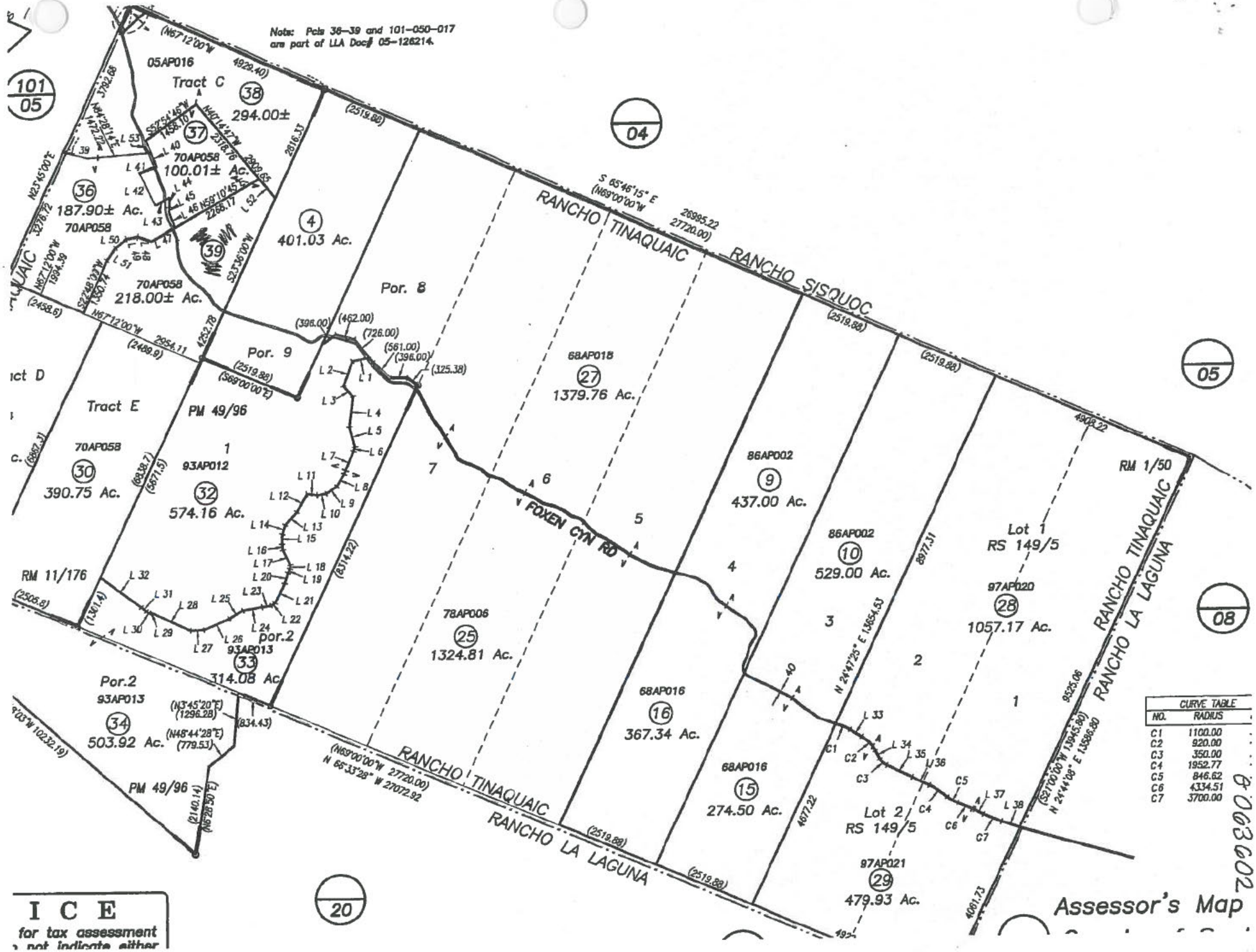
DWR 188 REV. 11-97

IF ADDITIONAL SPACE IS NEEDED, USE NEXT CONSECUTIVELY NUMBERED FORM

6 063602

SIRIUS 011
APN 133-070-039
7200 Foxen Cyn Rd.




Note: Pcls 36–39 and 101–050–017 are part of LLA Doc# 05–126214.
101
05
04
05
08
20
05AP016
Tract C
38
294.00±
37
70AP058
100.01± Ac.
36
187.90± Ac.
70AP058
39
70AP058
218.00± Ac.
4
401.03 Ac.
Por. 8
Por. 9
Tract D
Tract E
PM 49/96
70AP058
30
390.75 Ac.
93AP012
32
574.16 Ac.
RM 11/176
Por.2
93AP013
33
314.08 Ac.
Por.2
93AP013
34
503.92 Ac.
PM 49/96
RANCHO TINAQUAIC
RANCHO SISQUOC
68AP018
27
1379.76 Ac.
FOXEN CYN RD
78AP006
25
1324.81 Ac.
68AP016
16
367.34 Ac.
68AP016
15
274.50 Ac.
86AP002
9
437.00 Ac.
86AP002
10
529.00 Ac.
97AP020
28
1057.17 Ac.
Lot 1
RS 149/5
Lot 2
RS 149/5
97AP021
29
479.93 Ac.
RM 1/50
RANCHO TINAQUAIC
RANCHO LA LAGUNA
RANCHO LA LAGUNA
CURVE TABLE
NO. RADIUS
C1 1100.00
C2 920.00
C3 350.00
C4 1952.77
C5 846.62
C6 4334.51
C7 3700.00
Assessor's Map
I C E
for tax assessment

9N 33W 1

1N33W 1A
1/4

CC294

ORIGINAL
File with DWR

STATE OF CALIFORNIA
WELL COMPLETION REPORT
Refer to Instruction Pamphlet

No. 490913

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

Page ___ of ___
Owner's Well No. #94-1
Date Work Began MAY 11, 94 Ended MAY 16, 94
Local Permit Agency SAN LUIS OBISPO COUNTY ENVIRONMENTAL HEALTH
Permit No. 94-059 Permit Date 4-28-94

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.*
	(SEE ATTACHED LOG)

TOTAL DEPTH OF BORING 80 (Feet)
TOTAL DEPTH OF COMPLETED WELL 80 (Feet)

[redacted]

CITY

WELL LOCATION

Address 4665 SANTA MARIA MESA ROAD
City
County SAN LUIS OBISPO
APN Book ___ Page ___ Parcel 090-431-004
Township 10N Range 33W Section 25
Latitude ___ DEG. ___ MIN. ___ SEC. NORTH Longitude ___ DEG. ___ MIN. ___ SEC. WEST

LOCATION SKETCH

NORTH
35.892623
-120.296599
(SEE ATTACHED MAP)
WEST EAST
SOUTH

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 DIRECT ROTARY FLUID MUD

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)
0 to 45	22	X				F480-PVC	12	.606	
45 to 75	22		X			F480-PVC	12	.606	.040
75 to 80	22	X				F480-PVC	12	.606	

ANNULAR MATERIAL

DEPTH FROM SURFACE Ft. to Ft.	TYPE: CEMENT (✓)	BENTONITE (✓)	FILL (✓)	FILTER PACK (TYPE/SIZE)
0 to 30	X			6 SACK SLURRY
30 to 80			X	SISQUOC
				½x8GRAVEL

ATTACHMENTS (✓)

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

ATTACH ADDITIONAL INFORMATION, IF IT EXISTS.

CERTIFICATION STATEMENT

[redacted]

IF ADDITIONAL SPACE IS NEEDED, USE NEXT CONSECUTIVELY NUMBERED FORM

DWR 188 REV. 7-90

9N35W01B

CC037

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. **316867**

Notice of Intent No. _____
Local Permit No. or Date 8849 APN - 129-110-02

State Well No. _____
Other Well No. _____

(1) OWNER: Name Bob Wood
Address P.O. Box 491
City Santa Maria, CA ZIP 93455

(2) LOCATION OF WELL (See instructions):
County Santa Barbara Owner's Well Number 2
Well address if different from above 4800 Santa Maria Mesa
Township _____ Range _____ Section _____
Distance from cities, roads, railroads, fences, etc.
App 129-110-02-00

34 S3 34.99
120 18 11.43

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 3/8 x 8
Diameter of bore 12.5
Packed from 20 to 160 ft.

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

From ft.	To ft.	Dia. in.	Gage or Wall	From ft.	To ft.	Slot size
0	160	5"	SDR	100	160	80

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

(9) WELL SEAL:
Was surface sanitary seal provided? Yes ☒ No ☐ If yes, to depth 20 ft.
Were strata sealed against pollution? Yes ☐ No ☐ Interval _____ ft.
Method of sealing _____

(10) WATER LEVELS:
Depth of first water, if known _____ ft.
Standing level after well completion 100 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 160 ft. Completed depth 160 ft.

from ft.	to ft.	Formation (Describe by color, character, size or material)
0	15	coarse sand
15	60	gravel with clay
60	75	gravel
75	95	clay and gravel
95	100	blue clay
100	158	sand and gravel
158	162	brown clay

Work started 4/20 19 91 Completed 4/22 19 91

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 Ron Taylor Drilling (Person, firm, or corporation) (Typed or printed)
Address 2801 Mahoney Rd.
City Santa Maria, CA ZIP 93455
License No. C57 523 858 Date of this report _____

CONFIDENTIAL
NOT FOR PUBLIC USE
WATER CODE SEC. 13752

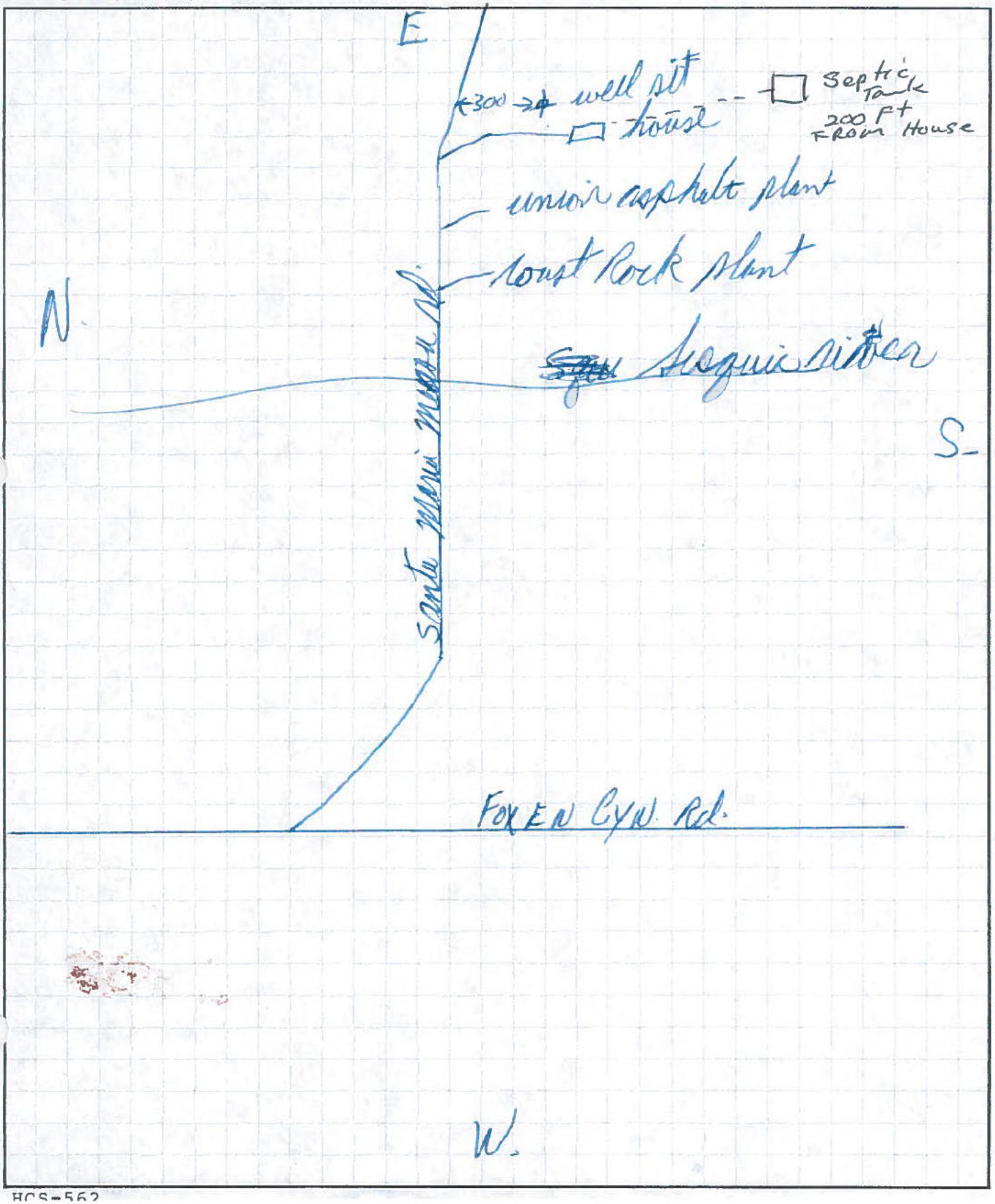
DWR 188 (REV. 12-86) IF ADDITIONAL SPACE IS NEEDED, USE NEXT CONSECUTIVELY NUMBERED FORM 86 96355

WELL PERMIT APPLICATION

Plot Plan (¼" = 20')

Permit No. 8849
Page 2 of 2
129-110-02

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

Permit No. 8849
Page ___ of ___ pages
APN # 129-110-02

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

Well Permit Application Received: Date 4/10/91

Site Investigation By H. Ruiz Date 4/10/91

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 visable sources of contamination to well site - APN checked w/assessors office - no land use concern as per. J. Asthesen

Application Reviewed and Approved: By H. Ruiz Date 4/11/91

Work Investigation Record

Date 4/23/91

Well Site #: ____

Casing Information

Type: Steel ☐ PVC ☒ Other ☐ ____

Class/Gage/NSF: S.DR 480

ASTM#: ____

Diameter: 6 Total Depth: 162

Casing Schedule

0' - 102' = Blank
102 - 162 = Perf

Borehole

Total Depth of Well: 162

Annular Seal Depth: 20 ft measured IR

Well Bore Diameter: 12¼

Sealing Material: Concrete

Amount: 1 yd.

Method of Pour: ~~Pump~~ Gravity

Use of Tremie: No

Driller(s): Ron Taylor

Comments: 6" PVC Cap on site at time of Seal

Final Inspection and Approval/Denial: By H. Ruiz Date 4/23/91

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

W-320P Rev. 12/89

9N 33W 1F

ORIGINAL

File with DWR

STATE OF CALIFORNIA
THE RESOURCES AGENCY
DEPARTMENT OF WATER RESOURCES

WATER WELL DRILLERS REPORT

CC309
Do not fill in
No. 161612

[redacted] of Intent No. _____
Local Permit No. or Date S.B. Co. #5286

State Well No. _____
Other Well No. _____

(1) OWNER: Name [redacted]
Address [redacted]
City _____ Zip _____

(2) LOCATION OF WELL (See instructions):
County Santa Barbara Owner's Well Number _____
Well address if different from above A.P.N. 129-100-07.
Township 9N Range 33W Section 1
Distance from cities, roads, railroads, fences, etc. _____

34.886433
-120.303764

(SEE ATTACHED MAP)

[redacted]

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: Sisquoc
Yes ☒ No ☐ Size ¼ X 8
Diameter of bore 28"
Packed from 0 to 495 ft.

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

(8) PERFORATIONS: .060 X 2½"
Type of perforation or size of screen

From ft.	To ft.	Dia. in.	Gage or Wall	From ft.	To ft.	Slot size
0	495	14	.312	125	485	.060 X 2½ X 28 Row Vertical Perforations

(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 30"Pipe Cemented In 36"Borehole

(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 _____
[redacted]cal 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 505 ft. Depth of completed well 495 ft.
from ft. to ft. Formation (Describe by color, character, size or material)

(SEE ATTACHED LOG)

Work started 11-13-19 86 Completed 11-26-19 86

WELL DRILLER'S STATEMENT:
This well was drilled under my jurisdiction and this report is true to the best of my knowledge
SIGNED [redacted]
NAME
Address
City
License No. C57-229570 Date of this report 12-02-86

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

161612

WATER WELL DRILLING LOG

Owner: [redacted] Company:

Well No.: Rig: #8

Location of Well: A.P.N. 129-100-07 T-9N, R-33W, Section 1

Surface Pipe or Seal: Surface Pipe Cemented In 36" Borehole Size: 30"O.D. Depth: 50' Gauge: .250

Well Bore Diameter: 28" Depth of Casing Set: 495'

Casing Size: 14"O.D. Gauge: .312W Type: Steel

Perforations: Size: .060 X 2½ Type: Vertical Perf's. Number: 28 Rows

Perforation Location from Ground Level: 125' From: 0' To: 125' Blank

125' 485' Perf.

485' 495' Blank,

With Bull-Nose On Bottom

Gravel Pack: Type: Dumped Size: ¼ X 8 Sisquoc Quantity: 90 TOns

Bits: No. Used: Size:

Drilling Method: Air: Foam: Mud: XX

Material Used: Gel.: 216 - Sacks Quik Gel P-95: Foam:

Well Started: 11-13-86 Well Completed: 11-26-86 Driller: Tony Betita

TEST PUMPING INFORMATION:

Production Test:

Standing Water Level: Pumping Level:

G.P.M.: Pumping Level

REMARKS:

[redacted]

[redacted]

161612

FORMATION LOG

FROM	TO	DESCRIPTION
0'	6'	Top Soil
6'	33'	Gravel, Sand
33'	42'	Brown Clay - Fine Sand
42'	103'	Gravel - Sand
103'	113'	Brown Clay
113'	145'	Gravel - Sand
145'	178'	Brown Clay
178'	205'	Light Brown Gravel - Sand
205'	212'	Brown Clay
212'	328'	Gravel - Sand
328'	337'	Brown Clay
337'	349'	Gravel - Sand
349'	355'	Brown Clay
355'	365'	Gravel - Fine Sand
365'	370'	Coarse Sand With Some Clay
370'	385'	Gravel - Sand
385'	400'	Coarse Sand And Gravel
400'	410'	Brown Clay
410'	420'	Coarse And Fine Sand
420'	431'	Brown Clay
431'	465'	Coarse Sand With Some Fine
465'	473'	Brown Clay
473'	485'	Coarse Sand With Some Fine
485'	505'	Brown Clay With Fine Sand

Xec Vertiezs Printers Lithographers - Santa Maria, CA

9N33W 16 CC038

ORIGINAL

File with DWR

STATE OF CALIFORNIA
THE RESOURCES AGENCY
DEPARTMENT OF WATER RESOURCES

WATER WELL DRILLERS REPORT

Do not fill in

No. 182663

State Well No.

Other Well No.

Notice of Intent No.

Local Permit No. or Date Santa Barbara, County Permit #5577

34 53 14.03 120 17' 56.60"

(2) LOCATION OF WELL (See instructions):

County Santa Barbara Owner's Well Number 3

Well address if different from above APN 129-110-01

Township 9N Range 33W Section 1

Distance from cities, roads, railroads, fences, etc. 1300' South of Santa Maria Mesa Road, Along East Fence Line, 24' West Of East Fence Line

(SEE ATTACHED MAP)

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 Sisquoc 1/4x1/8
Diameter of bore 24"
Packed from 0 to 470 ft.

(7) CASING INSTALLED:

Steel ☒ Plastic ☐ Concrete ☐

(8) PERFORATIONS:

Type of perforation or size of screen .040 Wire Wrap Screen

From ft.	To ft.	Dia. in.	Gage or Wall	From ft.	To ft.	Slot size
0	200	14	.312	200	460	.040 Wire Wrap Well Screen
460	470	14	.312			

(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 30" Conductor Pipe Cemented In 30" Borehole

(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 474 ft. Depth of completed well 470 ft.

from ft.	to ft.	Formation (Describe by color, character, size or material)
		(SEE ATTACHED LOG)

Work started May 3 19 88 Completed May 17 19 88

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 Charles C Wells (Well Driller)

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

Address P.O. Box 1007

City Santa Maria, CA 93456 Zip 93456

License No. C57-229570 Date of this report May 24, 1988

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

FLOYD V. WELLS, INC.
"Depend on Wells for Water"
1337 WEST BETTERAVIA ROAD
SANTA MARIA, CALIFORNIA 93455
(805) 925-8628
CALIFORNIA LICENSE NO. C57-229570

WATER WELL DRILLING LOG

Owner: Company:

Well No.: 3 Rig: No. 5

Location of Well: 1300' South Of Santa Maria Mesa Road, Along East Fence Line.
24' West of East Fence.
APN 129-110-01
T-9N, R-33W, Section 1

Surface Pipe or Seal: Cemented in 36" Borehole Size: 30" OD Depth: 50' Gauge: .250

Well Bore Diameter: 24" Depth of Casing Set: 470'

Casing Size: 14" O.D. Gauge: .312 Type: Steel

Perforations: Size: .040 Type: Wire Wrap Screen Number: Full Flow

Perforation Location from Ground Level: 200' From: 0' To: 200' Blank
200' 460' Screen
460' 470' Blank
With Bull Nose On Bottom

Gravel Pack: Type: Sisquoc Size: 1/4 X 1/8 Quantity: 55 Tons

Bits: No. Used: 5 Size: 9-7/8", 17", 23", 24", 36"

Drilling Method: Air: Foam: Mud: X

Material Used: Gel.:128-50# Sacks Quick Gel ~~PXSX~~ Shur-Gel 14-50# Sacks ~~XXXX~~ 60# Drispac

Well Started: May 3, 1988 Well Completed: May 17, 1988 Driller: Mark

TEST PUMPING INFORMATION:

Production Test:

Standing Water Level: Pumping Level:

G.P.M.: Pumping Level

REMARKS:

Ken Verbeas, Printers, Lithographers - Santa Maria, CA

FLOYD V. WELLS, INC.
"Depend on Wells for Water"
1337 WEST BETTERAVIA ROAD
SANTA MARIA, CALIFORNIA 93455
(805) 925-8626
CALIFORNIA LICENSE NO. C57-229570

FORMATION LOG

(- Well No. 3

FROM	TO	DESCRIPTION
0'	26'	Large Gravel With Medium Sand
26'	29'	Coarse Gravel With Brown Clay
29'	128'	Large Gravel With Medium Sand
128'	211'	Brown Clay With Gravel And Fine Sand
211'	238'	Coarse Gravel And Sand With Clay Stringers
238'	256'	Brown Clay With Coarse Gravel
256'	358'	Coarse Gravel With Clay Stringers
358'	445'	Brown Clay With Small Amounts Of Gravel
445'	474'	White Clay With Coarse Sand

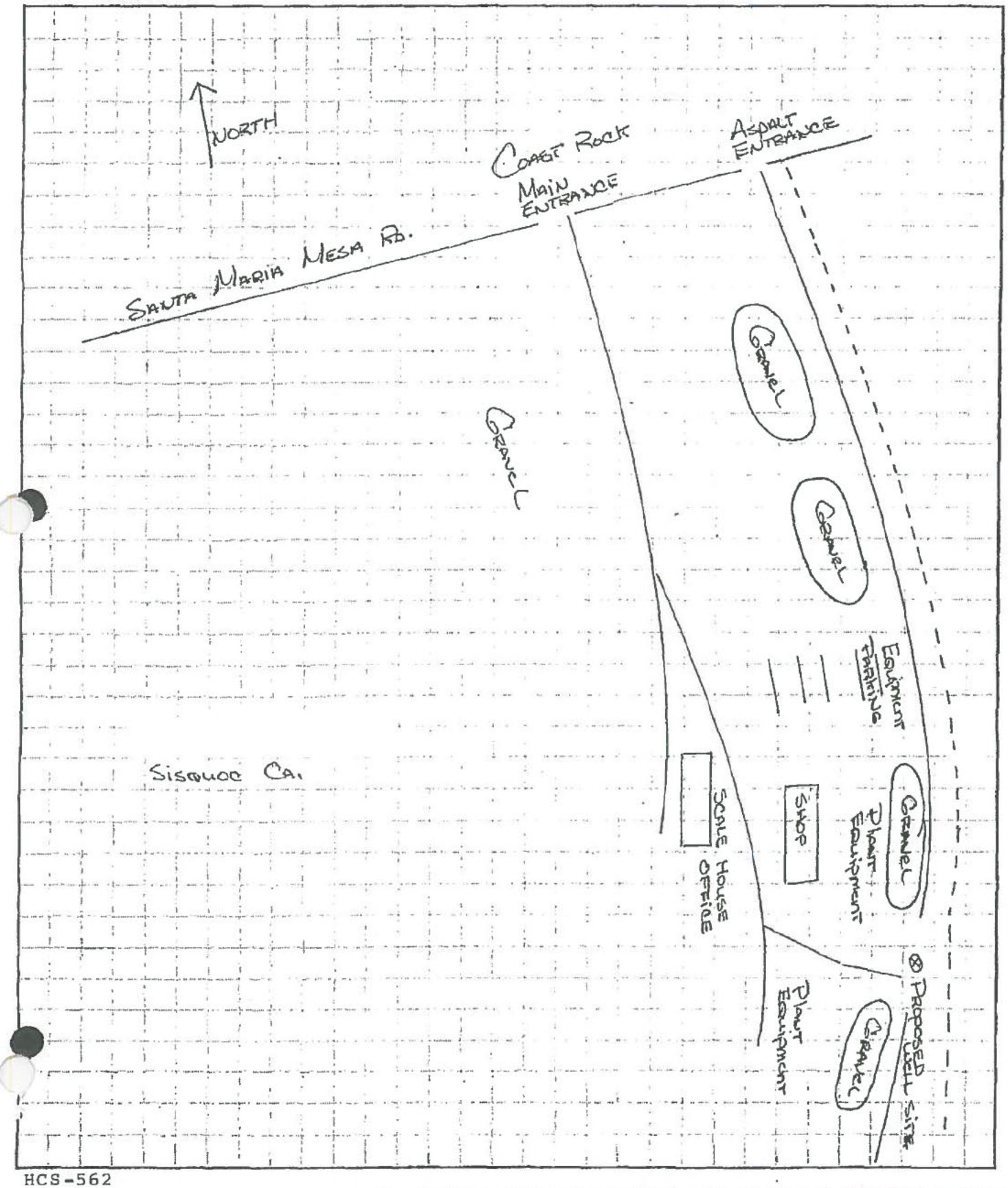
Ken Vertrees, Printers, Lithographers - Santa Maria, CA

WELL PERMIT APPLICATION

Plot Plan (¼" = 20')

Permit No. 5577
Page 2 of 2

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

9N/32W01H

LLUSY

File Original with DWR

State of California

Well Completion Report

Refer to instructions on reverse side

No. e0271817

Page 1 of 1

Owner's Well Number Rancho Vinedo - Well 3

Date Work Began 05/27/2015 Date Work Ended 6/5/2015

Local Permit Agency Santa Barbara County Environmental Health Services

Permit Number WP0000381 Permit Date 2/6/15

DWR Use Only – Do Not Fill In

State Well Number Site Number

Latitude N Longitude W

APN/TRS Other

Geologic Log

Orientation ⦿ Vertical ○ Horizontal ○ Angle Specify

Drilling Method Reverse Circulation Rotary Drilling Fluid Bentonite mud

Depth from Surface Feet	to Feet	Description (Describe material, grain size, color, etc.)
0	80	Clay, Gravel
80	100	Clay, Rock
100	120	Rock
120	140	Rock, Clay
140	160	Clay
160	180	Clay, Rock
180	240	Rock
240	260	Sand, Rock
260	280	Rock, Sand, Clay
280	320	Clay, Gravel
320	400	Clay
400	420	Clay, Gravel
420	520	Gravel, Clay
520	540	Clay, Gravel
540	560	Clay, Sand
560	620	Sand, Gravel
620	640	Clay, Sand
640	650	Fine Sand, Small Gravel

Total Depth of Boring 650 Feet

Total Depth of Completed Well 640 Feet

RECEIVED

NOV 13 2015

ENVIRONMENTAL HEALTH SERVICES

Well Owner

Name Edwin Wood

Mailing Address 4800 Santa Maria Mesa Road

City Santa Maria State CA Zip

Well Location

Address 4800 Santa Maria Mesa Road

City Santa Maria County Santa Barbara

Latitude 34 Deg 53 Min 19 Sec N Longitude 120 Deg 17 Min 44 Sec W

Datum Dec. Lat Dec. Long

APN Book Page Parcel 129-110-002

Township 9N Range 32W Section N/A

Location Sketch

(Sketch must be drawn by hand after form is printed)

North

See Attached Map

West East

South

I certify that the information on this form is true and complete

Activity

⦿ New Well

○ Modification/Repair

○ Deepen

○ Other

○ Destroy

Planned Uses

⦿ Water Supply

☐ Domestic ☐ Public

☐ Irrigation ☐ Industrial

○ Cathodic Protection

○ Dewatering

○ Heat Exchange

○ Injection

○ Monitoring

○ Remediation

○ Sparging

○ Test Well

○ Vapor Extraction

○ Other

Water Level and Yield of Completed Well

Depth to first water 139 (Feet below surface)

Depth to Static Water Level 139 (Feet) Date Measured 09/15/2015

Estimated Yield* 900 (GPM) Test Type Constant Rate

Test Length 12.0 (Hours) Total Drawdown 75 (Feet)

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

Casings

Depth from Surface Feet	to Feet	Borehole Diameter (Inches)	Type	Material	Wall Thickness (Inches)	Outside Diameter (Inches)	Screen Type	Slot Size if Any (Inches)
0	50	42	Conductor	Mild Steel	.375	30		
0	210	26	Blank	Mild Steel	.313	16		
210	290	26	Screen	Mild Steel Ful Flo	.313	16	Louver	0.060
290	350	26	Blank	Mild Steel	.313	16		
350	630	26	Screen	Mild Steel Ful Flo	.313	16	Louver	0.060
630	640	26	Blank	M.S. w/SE Head	.313	16		

Annular Material

Depth from Surface Feet	to Feet	Fill	Description
0	50	Cement	10.5 Sack Slurry
0	50	Cement	Annular Seal
50	650	Filter Pack	6x8x12 Gravel

Attachments

☐ Geologic Log

☐ Well Construction Diagram

☐ Geophysical Log(s)

☐ Soil/Water Chemical Analyses

☐ Other

Certification Statement

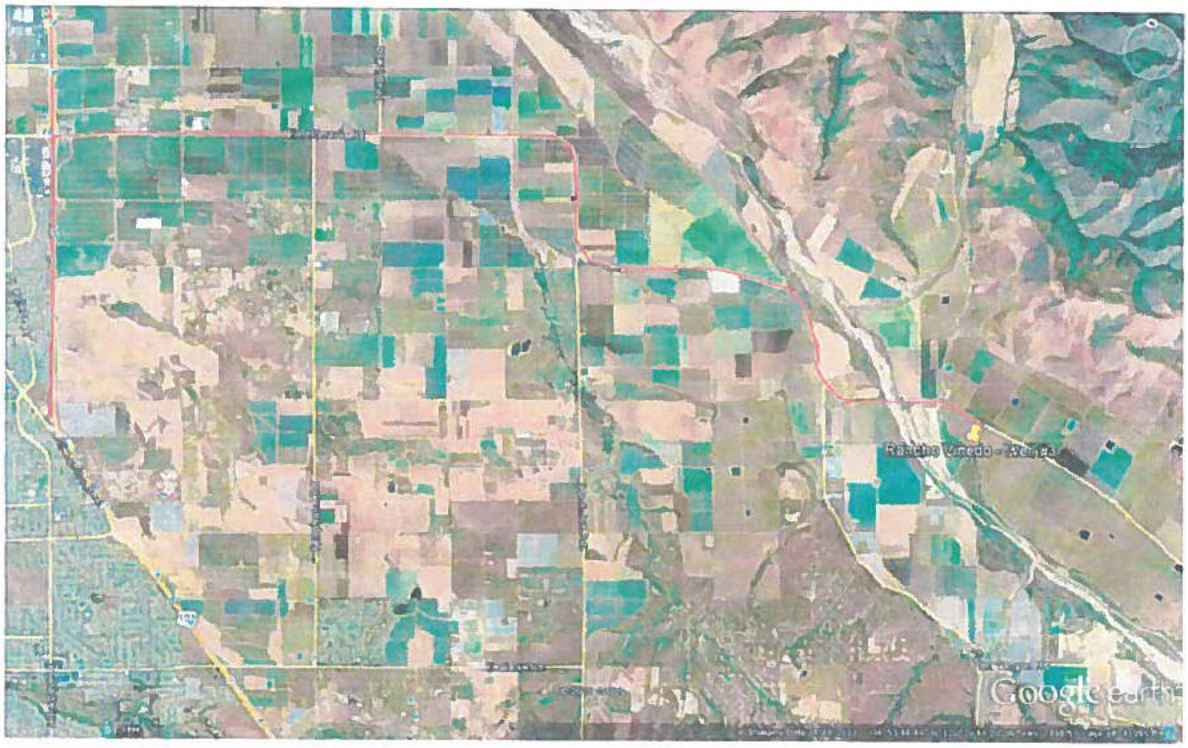
I (we) the undersigned, certify that this report is complete and accurate to the best of my (our) knowledge and belief

Name Tyson R. Davis, Pacific Coast Well Drilling, Inc.

P.O. Box 184 Templeton CA 93465

Signature 09/18/2015 927400

Date Signed C-57 License Number



From Hwy 101, go toward Santa Maria. Exit at Betteravia Road. Turn East on Betteravia Road and continue for approximately 3.0 miles on E. Betteravia Road, the road will turn into Foxen Canyon Road and curve 90 degrees to the right, facing South. Continue on Foxen Canyon Road for approximately 8.2 miles. When you pass Rancho Tepusquet Road, continue for approximately .2 more miles. Turn right and drive between Vineyards for approximately .20 miles or until vineyards begin to split. There will be a telephone pole on the left and an old well on the right. Well site is approximately 50' further, facing South-West.

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

December 10, 2015

(b) (6)

Subject: Completion Report for Water Well Permit: WP#0000381
APN: 129-110-002, @ 4800 Santa Maria Mesa Rd., Santa Maria, CA

This Department has reviewed the construction of the subject water well as related to 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.

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 if you have any questions or if you need a Water System Permit Application. I can be reached at (805) 346-8461.

Sincerely,

Paul Jenzen, REHS
Senior, Environmental Health Specialist

cc: Assessor's Office

9N/33W-1J
CC040

ORIGINAL
File with DWR

STATE OF CALIFORNIA
THE RESOURCES AGENCY
DEPARTMENT OF WATER RESOURCES

WATER WELL DRILLERS REPORT

Do not fill in
No. 352748

Notice of Intent No. _____
Local Permit No. or Date Santa Barbara County Permit #8879

State Well No. _____
Other Well No. _____

34 53 8.22 120 17' 54.75

(2) LOCATION OF WELL (See instructions):

County Santa Barbara Owner's Well Number #7
Well address if different from above APN 129-110-01
Township 9N Range 33W Section 1
Distance from cities, roads, railroads, fences, etc.
Coast Rock Property, Santa Maria, Mesa Road

(SEE ATTACHED MAP)

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 ☑
Irrigation ☒
Industrial ☐
Test Well ☐
Municipal ☐
Other ☐
(Describe)

(5) EQUIPMENT:

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

(6) GRAVEL PACK: Lone Star

Yes ☒ No ☑ Size Napis #3
Diameter of bore 24"
Packed from 0 to 665 ft.

(7) CASING INSTALLED:

Steel XX Plastic ☐ Concrete ☐

(8) PERFORATIONS: .038 Screen

Type of perforation or size of screen

From ft.	To ft.	Dia. in.	Gage or Wall	From ft.	To ft.	Slot size
0	229	14"	312	300	340	.038 Carbon Steel Wire Wrapped X-Heavy Screen
290	660	12	312	380	440	.038 Carbon Steel Wire Wrapped X-Heavy Screen
				480	580	.038 Carbon Steel Wire Wrapped X-Heavy Screen
				610	650	.038 Carbon Steel Wire Wrapped X-Heavy Screen

(9) WELL SEAL:

Was surface sanitary seal provided? Yes XX No ☐ If yes, to depth 1000 ft.
Were strata sealed against pollution? Yes XX No ☐ Interval 665-700 ft.
Method of sealing 30" Conductor Cemented in 40" Borehole

(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 XX No ☐ If yes, attach copy to this report

(12) WELL LOG: Total depth 698 ft. Completed depth 660 ft.

from ft.	to ft.	Formation (Describe by color, character, size or material)
		(SEE ATTACHED SCHEDULE)

Work started 9-18 19 91 Completed 10-7 19 91

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 Charles C Wells
(Well Driller)

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

Address 1337 W Betteravia Road
City Santa Maria, CA ZIP 93455
License No. C57-229570 Date of this report 10-10-91

UNOFFICIAL
ONLY FOR PUBLIC USE
NOT FOR WATER CODE SEC. 13752

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

352748

FLOYD V. WELLS, INC.
DEPEND ON WELLS FOR WATER

WATER WELL DRILLING LOG

PUMP SALES & SERVICE
WATER WELL DRILLING CONTRACTOR
1337 W. BETTERAVIA RD.
SANTA MARIA, CA 93455
805/925-8626 FAX 805/928-7826
CA LIC.#C57-229570

Owner: Company:

Well No.: 7 Rig: 5

Location of Well: Coast Rock Property, Santa Maria, Mesa Road
APN 129-110-01
T-9N, R-33@, Section 1
Santa Barbara County Permit #8879

Surface Pipe: Cemented In 40" Borehole Size: 30" Depth: 110' Gauge: .280W

Well Bore Diameter: 24" Depth of Casing Set: 660'

Casing Size: 14" & 12-3/4" Steel Gauge: .312 Wall Type: Steel

Perforations: Size: .038 Type: Carbon Steel Wire-Wrap Screen Number: Full Flow

Perforation Location from Ground Level: 300' From: 0 To: 288'.14" Blank

288-290', 14"x12-3/4" Reducer/290'-300', 12" Blank/300'-340',12" Screen/340'-380' Blank/
380-440', 12" Screen/440'-480', 12" Blank/480'-580', 12" Screen/580'-610', 12" Blank
610'-650', 12" Screen/650'-660', 12" Blank With Bullnose On Bottom

Gravel Pack: Type: Lone Star Size: Lapis #3 Quantity: 101 Tons

No. Used: 5 Size: 12¼", 17½", 24", 28",40"

Drilling Method: Air: Foam: 3-Drispac/2-Soda Ash Mud: XX

Material Used: Gel.: 240-50# QuikGel Polymer: 15-Shur-Gel/2 SAPP Foam:

Well Started: September 18, 1991 Well Completed: October 7, 1991 Driller: D' Quackenbush/ M Bagby

TEST PUMPING INFORMATION:

Production Test:

Standing Water Level: Pumping Level:

G.P.M.: Pumping Level

REMARKS:

Rea Vertrees, Printers, Lithographers - Santa Maria, CA

FLOYD V. WELLS, INC.
DEPEND ON WELLS FOR WATER

FORMATION LOG

352748

PUMP SALES & SERVICE
WATER WELL DRILLING CONTRACTOR
1337 W. BETTERAVIA RD.
SANTA MARIA, CA 93455
805/925-8626 FAX 805/928-7826
CA LIC.#C57-229570

WELL NO. 7

FROM	TO	DESCRIPTION
0	20'	San & Gravel
20'	24'	Sand & Gravel With Brown Clay
24'	40'	Brown Clay
40'	65'	Grey & Brown Clay
65'	77'	Grey & Brown Clay With Coarse Sand
77'	90'	Brown Clay/Fine Sand & Gravel
90'	105'	Fine Sand & Brown Clay
105'	120'	Sand & Gravel With Brown Clay
120'	165'	Coarse Sand & Gravel With Grey, White & Brown Clays
165'	210'	Brown Clay, Sand & Gravel With White Clay
210'	220'	Coarse Sand & Gravel
220'	240'	Brown Clay, Fine Sand & Gravel
240'	290'	Brown Clay, Coarse & Fine Sand, Gravel & White Clay
290'	350'	Fine & Coarse Sand, Gravel & Brown Clay
350'	395'	Brown Clay, Gravel & Fine Sand
395'	420'	Coarse & Fine Sand, Gravel & Brown Clay
420'	505'	Brown Clay, Sand & Gravel With White Clay
505'	520'	Coarse & Fine Sand With Brown Clay & Gravel
520'	540'	Brown Clay, Coarse & Fine Sand With Gravel & White Clay
540'	575'	Brown Clay, Sand & Gravel, White & Blue Clay
575'	620'	Blue-White Clay, Coarse & Fine Sand
620'	698'	Coarse & Fine Sand With Blue-White Clay

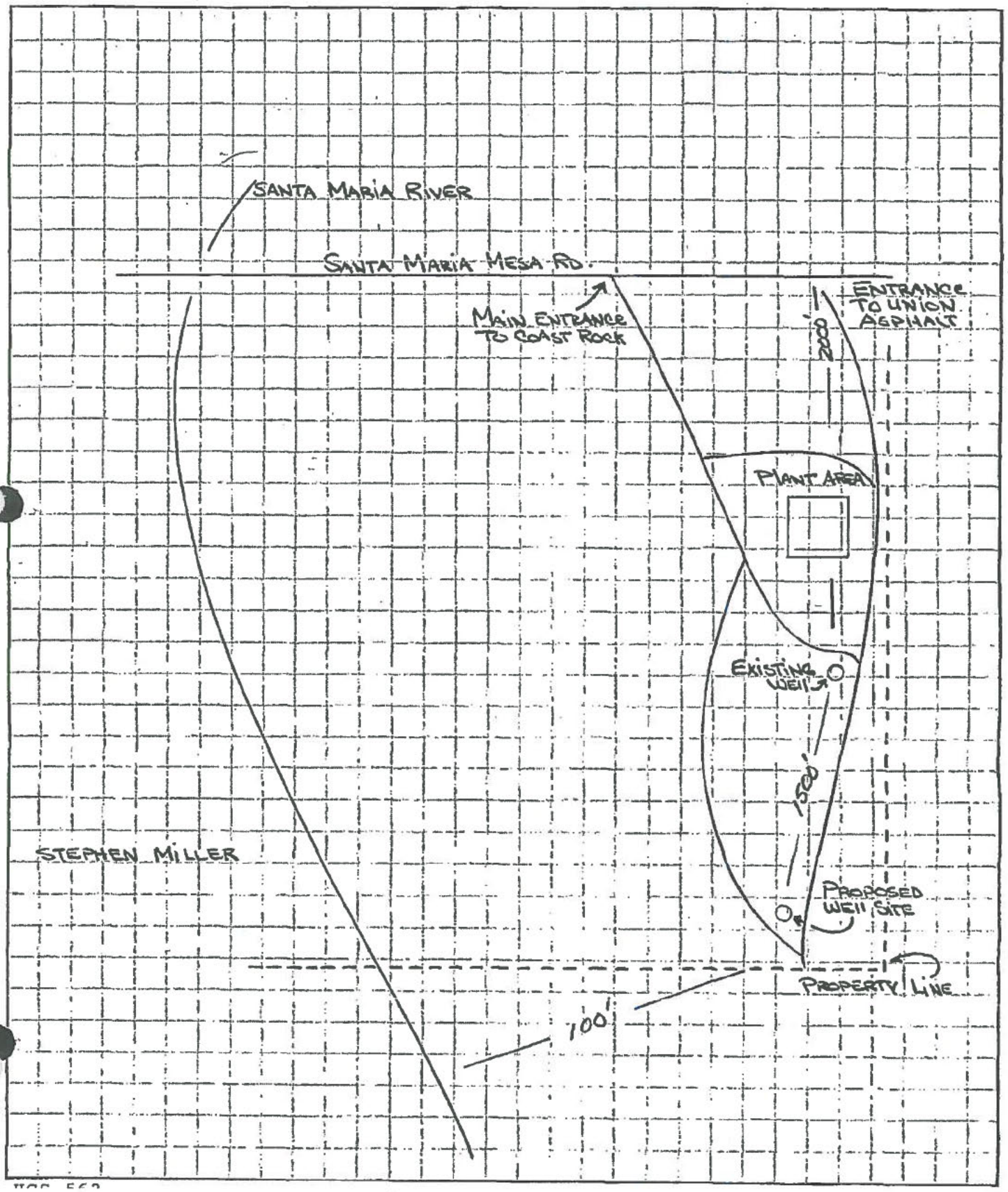
Ken Vertrees, Printers, Lithographers - Santa Maria, CA

WELL PERMIT APPLICATION 352748

Permit No. 8879
Page 2 of 2

Plot Plan ~~(½" = 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.



9N 33W01L

CC041

ORIGINAL
File with DWR

STATE OF CALIFORNIA
THE RESOURCES AGENCY
DEPARTMENT OF WATER RESOURCES

WATER WELL DRILLERS REPORT

Do not fill in

No. 276939

Notice of Intent No _____
Local Permit No or Date Santa Barbara County Permit #7401

State Well No. _____
Other Well No. _____

(2) LOCATION OF WELL (See instructions):

County Santa Barbara Owner's Well Number 2
Well address if different from above APN 129-100-11
Township 9N Range 33W Section 1
Distance from cities, roads, railroads, fences, etc. Garey, CA
See Map Details)

34 53 4.63
120 18 27.46
(SEE ATTACHED MAP)

WELL LOCATION SKETCH

(3) TYPE OF WORK:

New Well [X] Deepening [ ]
Reconstruction [ ]
Reconditioning [ ]
Horizontal Well [ ]
Destruction [ ] (Describe destruction materials and procedures in Item 12)

(4) PROPOSED USE:

Domestic [X]
Irrigation [X]
Industrial [ ]
Test Well [ ]
Municipal [ ]
Other [ ]
(Describe)

(5) EQUIPMENT:

Rotary [X] Reverse [ ]
Cable [ ] Air [ ]
Other [ ] Bucket [ ]

(6) GRAVEL PACK: Sisquoc

Yes [X] No [ ] Size 1/4x1/8
Diameter of bore 15"
Packed from 50 to 223 ft.

(7) CASING INSTALLED: PVC

Steel [ ] Plastic [X] Concrete [ ]

(8) PERFORATIONS: .040x2½

Type of perforation or size of screen

From ft.	To ft.	Dia. in.	Gage or Wall	From ft.	To ft.	Slot size
0	223	8	.410	143	223	.040x2½x24 Rows Vertical Perfs.

(9) WELL SEAL:

Was surface sanitary seal provided? Yes [X] No [ ] If yes, to depth 50 ft.
Were strata sealed against pollution? Yes [ ] No [X] Interval _____ ft.
Method of sealing Top 50' Cemented In 14-3/4" Borehole

(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 [X] If yes, by whom? _____
Was electric log made Yes [ ] No [X] If yes, attach copy to this report

(12) WELL LOG: Total depth 225 ft. Completed depth 223 ft.

from ft. to ft. Formation (Describe by color, character, size or material)

(SEE ATTACHED LOG)

Work started August 22, 19 88 Completed August 25, 19 88

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 Charles Wells (Well Driller)
NAME FOR FLOYD V. WELLS, INC. (Person, firm, or corporation) (Typed or printed)
Address P.O. Box 1007
City Santa Maria, CA ZIP 93456
License No. C57-229570 Date of this report August 29, 1988

ORIGINAL
NOT FOR PUBLIC USE
WATER CODE SEC. 13752

IF ADDITIONAL SPACE IS NEEDED, USE NEXT CONSECUTIVELY NUMBERED FORM

DWR 188 (REV. 12-86) 86 96355

FLOYD V. WELLS, INC.
"Depend on Wells for Water"
1337 WEST BETTERAVIA ROAD
SANTA MARIA, CALIFORNIA 93455
(805) 925-8626
CALIFORNIA LICENSE NO. C57-229570

WATER WELL DRILLING LOG

Owner: Company:

Well No.: No. 2 Rig: No. 7

Location of Well: Garey, California (See Map)
APN 129-100-11
T-9N, R-33W, Section 1

Surface Pipe or Seal: Cemented In 14-3/4" Borehole Size: --- Depth: 50' Gauge: --

Well Bore Diameter: 14-3/4" Depth of Casing Set: 223'

Casing Size: 8-5/8" O.D. (F-480) Gauge: .410 (SDR 21) Type: PVC

Perforations: Size: .040 x 2½ Type: Vertical Perforations Number: 24 Rows

Perforation Location from Ground Level: 143' From: 0' To: 143' Blank
143' 223' Perforated
Cap On Bottom

Gravel Pack: Type: Dumped Size: 1/4x1/8 Sisquoc Quantity: 7½ Tons

Bits: No. Used: 2 Size: 9-7/8" & 14-3/4"

Drilling Method: Air: Foam: Mud: X

Material Used: Gel.: 42-50# Quick Gel ~~XX35~~: 12-50# Shurgel Foam:

Well Started: August 22, 1988 Well Completed: August 25, 1988 Driller: Clarence Bevier

TEST PUMPING INFORMATION:

Production Test:

Standing Water Level: Pumping Level:

G.P.M.: Pumping Level

REMARKS:

FLOYD V. WELLS, INC.
"Depend on Wells for Water"
1337 WEST BETTERAVIA ROAD
SANTA MARIA, CALIFORNIA 93455
(805) 925-8626
CALIFORNIA LICENSE NO. C57-229570

FORMATION LOG

Well No. 2

FROM	TO	DESCRIPTION
0	50'	Course Gravel & Sand
50'	75'	Course Gravel & Sand, 1" Gravel
75'	90'	Course Gravel & Sand
90'	100'	Brown Sticky Clay
100'	125'	Course Gravel & Strips Of Brown Clay
125'	145'	Brown Sticky Clay
145'	175'	Course Gravel With Strips Of Brown Clay
175'	200'	Course Gravel With Brown Clay Stringers
200'	225'	Course Gravel With Small Brown Clay Stringers

Ken Vertnees, Printers, Lithographers - Santa Maria, CA

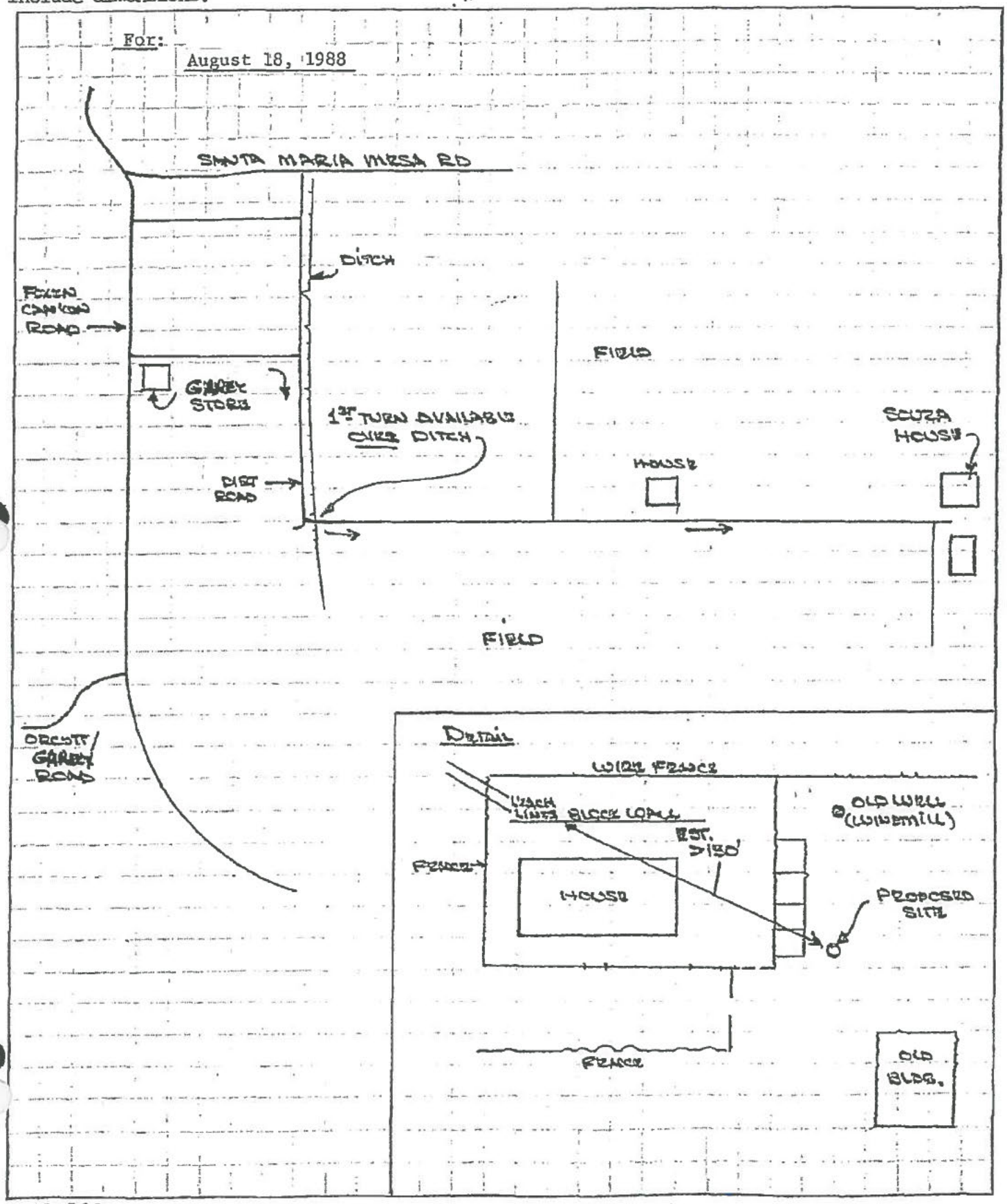
WELL PERMIT APPLICATION

Plot Plan

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.

For:

August 18, 1988



HCS-562

SR0105118 129-100-023 9N 55W 1M

QUADRUPLICATE
For Local Requirements

Page ___ of ___

Owner's Well No. 2

Date Work Began 8-26-07 Ended 9-27-07

Local Permit Agency Santa Barbara Co

Permit No. SR#0105118 Permit Date 8-2-07

STATE OF CALIFORNIA

WELL COMPLETION REPORT

Refer to Instruction Pamphlet

No. 1098073

CC042

DWR USE ONLY — DO NOT FILL IN

STATE WELL NO./STATION NO.

LATITUDE LONGITUDE

APN/TRS/OTHER

GEOLOGIC LOG

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

DRILLING METHOD Rotary FLUID mud

DEPTH FROM SURFACE Ft.	to Ft.	DESCRIPTION *Describe material, grain size, color, etc.*
0	20	Sandy Clay
20	125	Sand & Gravel
125	130	Brown Clay
130	136	Gravel
136	145	Clay
145	168	Coarse Sand
168	190	Sandy Clay
190	230	Sand & Gravel
230	240	Gravel With Clay
240	245	Clay
245	300	Sand & Gravel
300	320	Brown Clay
320	350	Gravel
350	360	Clay
360	400	Sand & Gravel
400	405	Brown Clay
405	450	Sand & Gravel

028 9/5/07 By 149 RC

TOTAL DEPTH OF BORING ___ (Feet)

TOTAL DEPTH OF COMPLETED WELL ___ (Feet)

WELL OWNER

Name Santa Maria Mesa

Mailing Address 400 Capitol Mall

CITY Sacramento STATE CA ZIP 95814

WELL LOCATION

Address Santa Maria Mesa Rd.

City Santa Maria

County Santa Barbara

APN Book ___ Page ___ Parcel 3

Township ___ Range ___ Section ___

Lat 34 DEG 53 MIN 5.43 SEC N Long 120 DEG 18 MIN 39.93 SEC W

LOCATION SKETCH

NORTH

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")*

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

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

ESTIMATED YIELD * 11 (GPM) & TEST TYPE Pump

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	200	26	X				e	16	250	
200	440	26		X			S	16	250	080

ANNULAR MATERIAL

DEPTH FROM SURFACE Ft.	to Ft.	TYPE: CEMENT (✓)	BENTONITE (✓)	FILL (✓)	FILTER PACK (TYPE/SIZE)
0	30	X			
					X

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 [illegible] (PERSON, FIRM OR CORPORATION) (TYPED OR PRINTED)

ADDRESS [illegible] CITY [illegible] STATE [illegible] ZIP

Signed [illegible] C-57 LICENSED WATER WELL CONTRACTOR DATE SIGNED ___ C-57 LICENSE NUMBER ___

DWR 188 REV 05-03

IF ADDITIONAL SPACE IS NEEDED, USE NEXT CONSECUTIVELY NUMBERED FORM

SR0105118

Permit No. 2[redacted]5118
Page ___ of ___ pages

129-100-023

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

Well Permit Application Received: Date 8 / 2 / 07

Site Investigation By J. Davies Date 8 / 2 / 07

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 8 / 2 / 07

Work Investigation Record

Date 9/4/07

Well Site #:

Casing Information

Type: Steel ☒ PVC ☐ Other ☐

Class/Gage/NSF:

ASTM#:

Diameter: 16" Total Depth:

Casing Schedule

0' - 200' = Blank
200 - 440 = Perfs

Borehole

Total Depth of Well: 440'
Annular Seal Depth: ≈ 25'
Well Bore Diameter: 26"
Sealing Material: 6 sack cement
Amount: ≈ 2 yds
Method of Pour: gravity
Use of Tremie: no
Driller(s): Ron Taylor Drilling

Comments: Cap on site for production casing

Final Inspection and Approval/Denial: By KC Date 9/4/07

Notice of Work Acceptance/Rejection Sent to Well owner On 9/5/07

W-320P Rev. 12/89

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

Elliot Schulman, MD, MPH Director/ Health Officer
Anne M. Faaron Deputy Director
Suzanne Jacobson, CPA Deputy Director
Michele Mickiewicz, MPH Deputy Director
Jane Overbaugh Deputy Director
Earl Lynch, MD, MPH Medical Director

September 5, 2007

(b) (6)

Subject: **Completion Report for Water Well Permit #0105118**
(Assessor's Parcel Number: 129-100-023 at (b) (6)

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 question.

Sincerely,

Kathy Cardiel, R.E.H.S.
Environmental Health Specialist

PC: Assessor's Office