

*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

State of California

Well Completion Report

Refer to Instruction Pamphlet

No. e0083962

DWR Use Only - Do Not Fill In

State Well Number/Site Number _____

Latitude _____ N _____ W
Longitude _____

APN/TRS/Other _____

Page 1 of 2

Owner's Well Number _____

Date Work Began 12/10/2008 Date Work Ended 12/15/2008

Local Permit Agency SAN LUIS OBISPO COUNTY HEALTH DEPT

Permit Number 2008-313 Permit Date 11/19/08

Geologic Log		
Orientation <input checked="" type="radio"/> Vertical <input type="radio"/> Horizontal <input type="radio"/> Angle Specify _____		
Drilling Method <u>ROTARY</u> Drilling Fluid <u>BENTONITE</u>		
Depth from Surface Feet to Feet	Description Describe material, grain size, color, etc	
0	1	WHITE SHALE
1	35	BROWN CLAY
35	40	SANDY SHALE GRAVEL
40	45	BROWN CLAY
45	70	SANDY & GRAVEL
70	80	BROWN CLAY
80	105	SAND & GRAVEL
105	155	BROWN CLAY
155	195	SANDY SHALE GRAVEL
195	255	BLUE CLAY
255	270	SANDY SHALE GRAVEL
270	280	BLUE CLAY
280	290	BLUE SHALE GRAVEL
290	320	BLUE CLAY
320	330	BLUE SHALE GRAVEL
330	350	BROWN CLAY
350	360	SANDY SHALE GRAVEL
360	420	SOFT BROWN SHALE & CLAY
420	450	SANDY BROWN CLAY
450	485	BROWN CLAY
485	490	SANDY SHALE GRAVEL
490	500	BROWN CLAY
500	515	SANDY SHALE GRAVEL
515	530	BROWN CLAY
530	540	SANDY SHALE GRAVEL
540	550	SOFT BROWN SHALE
550	560	SANDY SHALE GRAVEL
560	585	BROWN CLAY
585	615	SANDY SHALE GRAVEL
615	635	BROWN CLAY
Total Depth of Boring _____ Feet		
Total Depth of Completed Well _____ Feet		

Well Owner

Name MULHOLLAND CONSTRUCTION

Mailing Address 1690 LAGUNA DEL CAMPO

City TEMPLETON State CA Zip 93465

Well Location

Address 2260 PEPPER TREE

City PASO ROBLES County San Luis Obispo

Latitude 35 38 5 N Longitude 120 32 56 W
Dec. Min. Sec. Dec. Min. Sec.

Datum _____ Decimal Lat. _____ Decimal Long. _____

APN Book 015 Page 143 Parcel 018

Township 26S Range 13E Section 26

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 420 (Feet below surface)

Depth to Static _____

Water Level 390 (Feet) Date Measured 12/15/2008

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)

Annular Material		
Depth from Surface Feet to Feet	Fill	Description

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 MILLER DRILLING COMPANY
 Person, Firm or Corporation

Address _____ City _____ State _____ Zip _____

Signed _____ SEE PAGE 2
 C-57 Licensed Water Well Contractor Date Signed _____ C-57 License Number _____

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No. 60083962

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State Well Number/Site Number			
Latitude		Longitude	
APN/TRS/Other			

Page 2 of 2

Owner's Well Number _____

Date Work Began 12/10/2008

Date Work Ended 12/15/2008

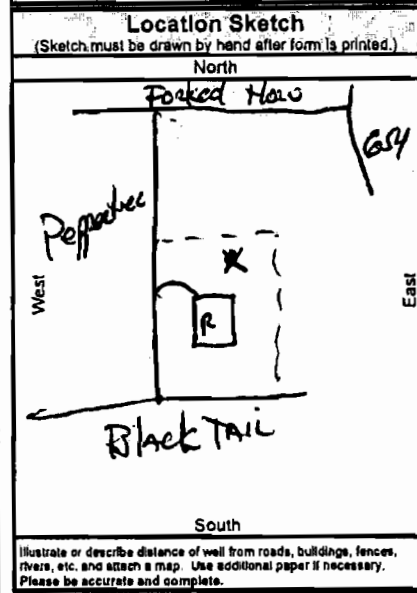
Local Permit Agency SAN LUIS OBISPO COUNTY HEALTH DEPT

Permit Number 2008-313

Permit Date 11/19/08

Geologic Log		
Orientation	Vertical	Horizontal
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Drilling Method <u>ROTARY</u>	Drilling Fluid <u>BENTONITE</u>	
Depth from Surface	Description	
Feet to Feet	Describe material, grain size, color, etc	
635	650	SANDY SHALE GRAVEL
650	660	BROWN CLAY
660	670	SANDY SHALE GRAVEL
670	700	BROWN CLAY WITH FINE SAND STRINGERS
NOTE: ANY PERSON REMOVING THE CAP FROM THIS WELL OTHER THAN MILLER DRILLING CO OR AUTHORIZED CONTRACTOR APPROVED BY US WILL VOID ALL STRUCTURAL WARRANTIES.		
BLOW TEST: 60 GPM @ 500 FT. 80+ GPM @ 660 FT.		
Total Depth of Boring	<u>700</u>	Feet
Total Depth of Completed Well	<u>670</u>	Feet

Well Owner	
Name	<u>MULHOLLAND CONSTRUCTION</u>
Mailing Address	<u>1690 LAGUNA DEL CAMPO</u>
City	<u>TEMPLETON</u> State <u>CA</u> Zip <u>93465</u>
Well Location	
Address	<u>2260 PEPPER TREE</u>
City	<u>PASO ROBLES</u> County <u>San Luis Obispo</u>
Latitude	<u>35</u> <u>38</u> <u>5</u> N Longitude <u>120</u> <u>32</u> <u>56</u> W
Datum	Decimal Lat. _____ Decimal Long. _____
APN Book	<u>015</u> Page <u>143</u> Parcel <u>018</u>
Township	<u>26S</u> Range <u>13E</u> Section <u>26</u>



Activity	
<input checked="" type="radio"/>	New Well
<input type="radio"/>	Modification/Repair
<input type="radio"/>	Deepen
<input type="radio"/>	Other _____
<input type="radio"/>	Destroy
Describe procedure and materials under "GEOLOGIC LOG"	
Planned Uses	
<input checked="" type="radio"/>	Water Supply
<input checked="" type="checkbox"/>	Domestic
<input type="checkbox"/>	Public
<input type="checkbox"/>	Irrigation
<input type="checkbox"/>	Industrial
<input type="radio"/>	Cathodic Protection
<input type="radio"/>	Dewatering
<input type="radio"/>	Heat Exchange
<input type="radio"/>	Injection
<input type="radio"/>	Monitoring
<input type="radio"/>	Remediation
<input type="radio"/>	Sparging
<input type="radio"/>	Test Well
<input type="radio"/>	Vapor Extraction
<input type="radio"/>	Other _____

Water Level and Yield of Completed Well	
Depth to first water	<u>420</u> (Feet below surface)
Depth to Static	_____
Water Level	<u>390</u> (Feet) Date Measured <u>12/15/2008</u>
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	Borehole Diameter	Type	Material	Wall Thickness	Outside Diameter	Screen Type	Slot Size
Feet to Feet	(Inches)			(Inches)	(Inches)		If Any (Inches)
0	490	9 7/8	BLANK	F480 PVC	.265	5	
490	670	9 7/8	PERF	F480 PVC	.265	5	Milled Slots 0.040

Annular Material			
Depth from Surface	Fill	Description	
Feet to Feet			
0	50	CEMENT	
50	670	GRAVEL PACK	BIRDSEYE

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 MILLER DRILLING COMPANY

Person, Firm or Corporation 329 NORTH MAIN STREET TEMPLETON CA 93465

Address City State Zip

Signed Kurt Rodinger Date Signed 12/16/2008 C-57 License Number 324634 BB

C-57 Licensed Water Well Contractor Date Signed C-57 License Number

Abalone Coast Bacteriology Lab

4149 Santa Fe Road, Suite 6 San Luis Obispo CA, 93401
Phone: 595-1080 Fax: 595-1080


Order # -	09-0604-2
Date/Time rec'd -	3/20/09 1520

Miller Drilling Company
301 North Main Street
Templeton, CA 93465

Contact: Kurt Bollinger
Phone: 434-1888

Sample #	Sample description	Date / Time	Analysis	Method	Result	Completed
-1	#17088	3/20/09	Total coliform	SM 9223 B.	Absent	3/21/09
	2260 Peppertree		E-coli	IDEXX	Absent	3/21/09

Report Completion Date: 3/21/2009

Reviewed: 
Amanda Smith, Lab Director