ENVIRONMENTAL HEALTH DIVISION 875-850 HAZARDOUS MATERIALS DIVISION 875-850 APPOINTMENT 875-8442

WELL APPLICATION and PERMIT FORM

RONMENTAL MANAGEMENT DEPARTMENT 8475 JACKSON ROAD, SUITE 230/240 SACRAMENTO, CA 95826

7.17 - 0.11 - 1.12 - 1.12 - 1.12				SACRAME	NTO, CA 95826
FOR OFFICE USE ONLY	Cop o	D4604		SRA	
I —	PPROVED			rmit Number:	24129
		Date Issued:		sus Tract:	
	: 7 110 100			Number: 410.3	
Grout inspection By: 15M					
Actual Well Depth: 515 Ac	tual Grout Depth: <u>25</u>	D Final Inspection B	y:	Date:	1 1
Depth to first Water:	_ Well Destruction	on Inspection By:		Date:/_	
Reinspection By:	Date(s):		Fee	@ Prevaling Rate: \$	
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COMMENTS: See >)	•			NS.
APPLICATION, F		RM WORK AT THE LO	CATION AS IND	ICATED BELOW:	u/
Inspecting Division: L' ÉNVIRÓN	~	A HAZARDOUS MA		(D)R	
Site Address: Fe no Betn	een Kleckley	st and Bullard St			
Nearest Major Cross Street: Schi	rra Avenue		Parcel Number:	: <u>0067-0010</u>	0-025
Property Owner:_				:	
Owner's Address				Zip:	
Well Contractor: Water De	. 14 1	ρ		r: 283326	
Contractor Address: 1202 Ke		(12) (6)	· · ·	e: 61301200	
	Zip: <u>95976</u>	Phone: (520) 662-	Well/Boring Ide	entification Number:	T-27
WORK TO BE PERFORMED:					
Construct Well, (C-57 Lic. Req.)	Install New Pump,	(C-57, C-61 or Class /	A) 📙 Test	Hole With Destruction	n (C-57 Lic. Req.)
Deepen Well, (C-57 Lic. Req.)	Repair/Replace Pun	np, (C-57, C-61 or Cla	ss A) 🔲 🛮 Inac	tivation Permit, Ow	ner Only
Repair Well, (C-57 Lic. Req.)	Destroy Well (C-57	Lic. Required)	☐ Oth	er (state)	
Comments:					- A-I 01
DISTANCE TO NEAREST: Leach Fi	eld: <u> </u>	-	Septic Tank:_/		ine: ~ ++
INTENDED USE: DRILLING		CONSTRUCTION SPECI	FIGATIONS		_
☐ Domestic/Private METHOD		Diameter: 10 5/8"		e mpen Gravel Pack:	X Yes D No
☐ Public Water System ☐ Auge	r CASING:	Diameter: (3) 2.4"	Lial's Denth: S	en common t	
	e Tool	If Steel, Gauge: #30	weno bepuii. <u>S</u>	ceen or Thickness	. Sch 40
☐ Cathodic Protection ☐ Drive		If Plastic, Type:			
_	y Air/mud	if Conductor, Diameter		(MOST MEE	1 A31W F-460)
	r (state) GROUT:	Depth: Comment			amost os t
Other (state)	,	Material: 5% cement			r e
Comments: Borehole, Casi	TRANSITION SEAL:				mnen I
PUMP INSTALLATION/REPAIR: Con		·		License Number:	
Type of Pump:	Horse Power:	License	Type:	Expiration Date	:
WELL/TEST HOLE DESTRUCTION:	Diameter:	Total Depth:		Depth to Water	r:
I will comply with all Codes, Rules and Regulations of the State and County pertaining to or regulating well construction, call for a grout/destruction inspection at least 48 hours prior to placement of sealing material, notify the Department within 5 days of the completion of my work so a final inspection can be made and obtain final approval before placing the well in service.					
Signature: Bab Wil	son_	Prope	erty Owner	☐ Well Contra	actor
Print Name: Bob Wilson	<u> </u>	Agen	t for Property Ow	ner* 🗷 Agent for \	Well Contractor*
Company: ENSP					
Mailing Address: 10324 Place	1 Ln. # 200	City, Sta	te Zin: Sactor	mento. CA (95829

A SITE PLAN MUST BE SUBMITTED WITH EACH APPLICATION PERMIT EXPIRES ONE (1) YEAR FROM DATE ISSUED

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