

**QUADRUPLICATE
For Local Requirements**

STATE OF CALIFORNIA
WELL COMPLETION REPORT
Refer to Instruction Pamphlet

HPN 005-013-24
DWR USE ONLY - DO NOT FILL IN

Page of

Owner's Well No. 1410 1010

No. **486043**

Date Work Began 4-21-92, Ended 4-27-92

Local Permit Agency LAKE COUNTY HEALTH DEPT

Permit No. 661 Permit Date 4-24-92

STATE WELL NO./STATION NO.	
LATITUDE	LONGITUDE
APN/TRS/OTHER	

GEOLOGIC LOG

ORIENTATION (✓) VERTICAL HORIZONTAL ANGLE (SPECIFY)

DEPTH TO FIRST WATER 10 (Ft.) BELOW SURFACE

DEPTH FROM SURFACE		DESCRIPTION <i>Describe material, grain size, color, etc.</i>
Ft.	to Ft.	
0	8	Red Clay + fine sand
8	25	Clay Red with layers of Red + sand
25	50	Gravel with some sand layers - Red in color

TOTAL DEPTH OF BORING 50 (Feet)
TOTAL DEPTH OF COMPLETED WELL 50 (Feet)

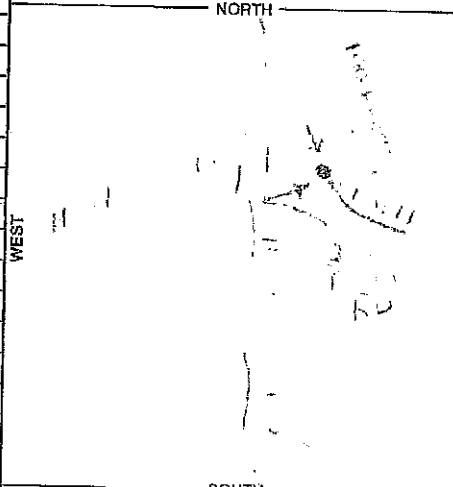
WELL OWNER

Name Ken & Heidi Knick
Mailing Address 760-17th Street
Lakeport CA 95452
CITY STATE ZIP

WELL LOCATION

Address 2411 Handwick's Rd
City Lakeport CA 95453
County LAKE
APN Book Page Parcel 15-013-24
Township 11N Range 10W Section
Latitude NORTH Longitude WEST
DEG. MIN. SEC. DEG. MIN. SEC.

LOCATION SKETCH



ACTIVITY (✓)

- NEW WELL
- MODIFICATION/REPAIR
 - Deepen
 - Other (Specify)
- DESTROY (Describe Procedures and Materials Under "GEOLOGIC LOG")
- PLANNED USE(S) (✓)
 - MONITORING
 - WATER SUPPLY
 - Domestic
 - Public
 - Irrigation
 - Industrial
 - "TEST WELL"
 - CATHODIC PROTECTION
 - OTHER (Specify)

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

DRILLING METHOD CABLE TOOL FLUID None

WATER LEVEL & YIELD OF COMPLETED WELL
DEPTH OF STATIC WATER LEVEL 10 (Ft.) & DATE MEASURED 4-27-92
ESTIMATED YIELD 30+ (GPM) & TEST TYPE Pump
TEST LENGTH 2 (Hrs.) TOTAL DRAWDOWN 2 (Ft.)
** May not be representative of a well's long-term yield.*

RECEIVED
JUN 4 1992
LAKE CO.
ENVIRONMENTAL HEALTH

DEPTH FROM SURFACE Ft. to Ft.	BORE-HOLE DIA. (Inches)	CASING(S)							DEPTH FROM SURFACE Ft. to Ft.	ANNULAR MATERIAL			
		TYPE (✓)				MATERIAL/ GRADE	INTERNAL DIAMETER (Inches)	GAUGE OR WALL THICKNESS		SLOT SIZE IF ANY (Inches)	TYPE		
		BLANK	SCREEN	CONDUIT	DUCTOR				FULL PIPE				CE- MENT (✓)
0	12	✓					PVC	8	3/16				
30	12	✓					PVC	8	3/16				Gravel

- 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 William G. McQuinn
(PERSON, FIRM, OR CORPORATION) (TYPE OR PRINTED)

ADDRESS 1111 Main St Lakeport CA 95453
CITY STATE ZIP

Signed William G. McQuinn
WELL DRILLER/AUTHORIZED REPRESENTATIVE

DATE SIGNED 4-27-92 963710
G-57 LICENSE NUMBER