*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 07N 30W 32

Page _____ of _____

Owner's Well Number _____

Date Work Began _____ Date Work Ended _____

Local Permit Agency Santa Barbara County Health Department

Permit Number WP2724 Permit Date 3/16/18

State of California

Well Completion Report

Refer to Instruction Pamphlet

No. e0366136

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	3	Top soil
3	10	Gravel and sand
10	17	Clay
17	77	Gravel and sand
77	90	Clay
90	98	Gravel. some clay
98	105	Clay, some gravel
105	140	Gravel and sand
140	150	Gritty clay
150	197	Gravel and sand
197	205	Sand
205	208	Gravel
208	217	Clay
217	455	Gravel and sand, lenses of clay
		12-Inch Protection Tube

Total Depth of Boring 455 Feet

Total Depth of Completed Well 430 Feet

Well Location

Address 4235 Baseline Ave

City Santa Ynez County Santa Barbara

Latitude 34 Deg. 38 Min. 9 Sec. N Longitude 120 Deg. 3 Min. 27 Sec. W

Datum _____ Dec. Lat. _____ Dec. Long. _____

APN Book 141 Page 430 Parcel 024

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 178 (Feet) Date Measured 04/12/2018

Estimated Yield * 590 (GPM) Test Type _____

Test Length 2.0 (Hours) Total Drawdown 16 (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	240	18	Blank	PVC	SDR21	10.6		
240	430	18	Screen	PVC	SDR21	10.6	Horizontal	0.032

Annular Material

Depth from Surface Feet	to Feet	Fill	Description
0	59	Concrete	
59	200	Gravel	3/8 Pea
200	430	Sand	#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 A & A Pump & Well Service
Person, Firm or Corporation

123 Industrial Way Buellton CA 93427
Address City State Zip

Signed [signature] 4/19/2018 577455
C-57 Licensed Water Well Contractor Date Signed C-57 License Number

DWR 188 REV. 2/2017

IF ADDITIONAL SPACE IS NEEDED, USE NEXT CONSECUTIVELY NUMBERED FORM

APR 27 2018