LWEL-970

Well Report

WC# 970

COUNTY OF SAN DIEGO
DEPARTMENT OF HEALTH SERVICES

WELL PERMIT APPLICATION

APN 128 460 45

Control # W60995

ALTAIR GROUP

TYPE OF WORK (Check)		USE (Check)			EQUIPMENT (Check)	
New Well	☒	Individual Domestic	☐		Rotary	☒
Repair or Modification	☐	Agricultural	☐	Community ☒	Cable Tool	☐
Time Extension	☐	Industrial	☐	Other ____	Other	☐
Destruction	☐					

PROPOSED WELL DEPTH
Max. 1000 Min. 100 (Feet)

PROPOSED CASING
Type STEEL Depth 50 Diameter 6 5/8 Wall or Gage .188

PROPOSED SEALING ZONE(S)
From 0 to 50 Feet
~~From~~ ____ to HARD ROCK Feet
From ____ to ____ Feet

PROPOSED PERFORATIONS OR SCREEN
From ____ to ____ Feet
From ____ to ____ Feet
From ____ to ____ Feet
From ____ to ____ Feet

SEALING MATERIAL (Check)
Neat Cement Grout ☐ Bentonite Clay ☐
Sand Cement Grout ☐ Concrete ☒
Other-Specify: ____

DATE OF WORK
Start 8-3-88
Completion 8-10-88

NAME OF WELL OWNER
ALTAIR GROUP

NAME OF WELL DRILLER
JOHN KRATZ

LOCATION OF WELL
OAK GLEN ROAD VALLEY CENTER

COMPANY
MULTI WATER SYSTEMS

DISPOSITION OF APPLICATION
(FOR HEALTH OFFICERS USE ONLY)

☐ APPROVED ☐ DENIED

☒ APPROVED WITH CONDITIONS

Report Reason(s) for Denial or Necessary Conditions Here:
well to be installed to state and county codes

Joan K. Bowen
HEALTH OFFICER

8/3/88
DATE

BUSINESS ADDRESS
RT 1 Box 66 ESCONDIDO CA. 92027

LICENSE NUMBER
355283 A C57

Cash Deposit ☒
Bond Posted ☐

140.00 Fee paid on 8-3-88

I hereby agree to comply with all regulations of the Department of Health Services and with all ordinances and laws of the County of San Diego and of the State of California pertaining to well construction, repair, modification and destruction. Immediately upon completion of work I will furnish the Department of Health Services with a complete and accurate log of the well.

Sheryl L. Kratz
APPLICANT'S SIGNATURE

8-2-88
DATE

LWELL-970

DHS:EHP-731 (3/85)

2 notices sent for not receiving well log.
12/5/88 + 12/21/88

COUNTY OF SAN DIEGO
DEPARTMENT OF HEALTH SERVICES

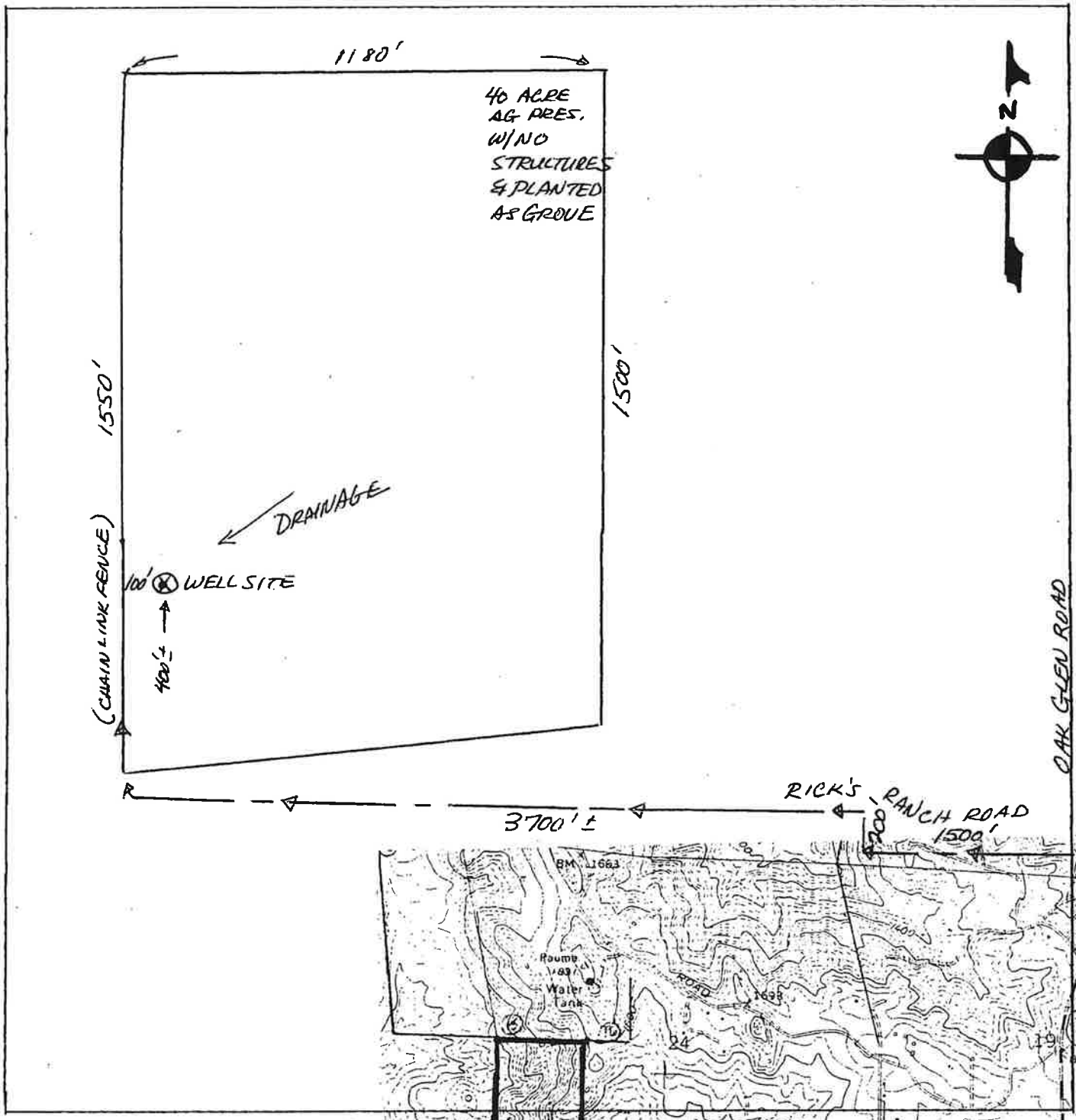
WELL PERMIT APPLICATION

Control # W60995

Assessor's Parcel No. 128-460-45

LOCATION

INDICATE BELOW THE VICINITY AND EXACT LOCATION OF 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 OTHER POTENTIAL CONTAMINATION SOURCES, INCLUDING DIMENSIONS.



DHS:EHP-731 (3/85)

County Mail Station –A-21

FIRST CARBON COPY

WQR 10/16/89

COUNTY OF SAN DIEGO
DEPARTMENT OF HEALTH SERVICES
1700 PACIFIC HIGHWAY, SAN DIEGO, CA 92101-2417

SM B-2

ASSESSORS PARCEL NUMBER
128 460 45
W60995

Notice of Intent No. 251550
Local Permit No. or Date W60995

WATER WELL DRILLERS REPORT
(INSERT under ORIGINAL PAGE w/carbon of State Form)

State Well No.
Other Well No.

The information in this grayed area has been blocked from public viewing pursuant to section 13752 of the Water Code and the Information Practice Act of 1977, to protect personal information.

(2) LOCATION OF WELL (See instructions): 80290

County San Diego Owner's Well Number
Well address if different from above Rick;sRanch Rd ValleyCenter
Township 10S Range 2W Section 24
Distance from cities, roads, railroads, fences, etc. see map

DEPARTMENT USE ONLY

Completed Well Construction:
Date 29 Jan 90
Date Inspected 29 Jan 90
Comments Complete subject to flowday
Water Sample Taken? No
Sanitarian's Approval: Jan Bence 29 Jan 90 Env. Health Service

(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 X ☐ Air ☐
Other ☐ Bucket ☐

(6) Gravel Pack: Community X
Yes ☐ No ☐ Size
Diameter of above
Packed from ____ to ____ ft.

(7) Casing Installed:
Steel ☐ Plastic ☐ Concrete ☐

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

From ft.	To ft.	Dia. in.	Gage or Wall	From ft.	To ft.	Slot Size
+2	95	8 5/8	.188			

(9) WELL SEAL:
Was surface sanitary seal provided? Yes ☐ No ☐ If yes, to depth ____ ft.
Were strata sealed against pollution? Yes ☐ No ☐ Interval 55 ft.
Method of sealing 0-55 Cement

(10) WATER LEVELS:
Depth of first water, if known ____ ft.
Standing level after well completion 87 ft.

(11) WELL TESTS:
Was well test made? Yes ☐ No ☐ If yes, by whom? Driller
Type of test Pump ☐ Bailer ☐ Air lift ☐ X
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 ____ ft. Depth of completed well ____ ft.

from ft.	to ft.	Formation (Describe by color, character, size or material)
0	33	Overburden, DG, 20-22 broken rock
33	58	BW granite weathered;sm.frac 40'
58	108	BW gran. w/fracs 76,88,933
108	158	BW gran. w/fracs 132,141
158	233	BW gran. w/fracs 159,163,170,178,201 207,210,broken @ 216-226
233	258	BW gran w/frac 238,broken 256-25 rose & green color
258	308	BW gran.w/frac 260,273,285
308	356	BW gran.w/lrg.frac 305;336-338 flowing 6 gpm
358	433	BW gran w/fracs 395.397;lrg frac @ 399;413 -flowing 20 gpm
433	558	BW gran. broken @ 435;lrg frac @ 479; flowing 25 gpm
558	658	BW gran.w/frac586,590,615,619
658	751	BW gran. w/frac 734,743 and flowing 42+gpm

Flow was measured @ 60gpm by airlift method. When actually pumped this flow maybe increased or decreased subject to the formation conditions.

AIRLIFT: 751' @ 60 gpm
651' @ 50 gpm
551' @ 50 gpm
451' @ 42 gpm
351' @ 35 gpm
251' @ 22 gpm

Field Test @ 331 GPM

Work Started ____ 19 Completed ____ 19

WELL DRILLERS STATEMENT: I hereby declare under penalty of perjury that the information provided in this report is true. This water well was installed in compliance with San Diego County Code and State of California, Department of Water Resources, Bulletin No. 74. 8/4 88 4/30 89

SIGNED ____ (Well Driller)

NAME Multi Water Systems (Person, firm, or Corporation) (Type or Print)

ADDRESS 23935 Old Wagon Rd.

CITY Escondido, Calif. ZIP 92027

LICENSE NO. 355283 C57 DATE THIS REPORT 10/6/89

DHS:EHP-732 (83) CONFIDENTIAL – NOT FOR PUBLIC USE – WATER CODE SEC. 13752