DWR of — mail 11/29/05 CG

STATE OF CALIFORNIA

WELL COMPLETION REPORT

Refer to Instruction Pamphlet

No. 0902807

DWR USE ONLY — DO NOT FILL IN

STATE WELL NO./STATION NO.

LATITUDE — LONGITUDE

APN/TRS/OTHER

Owner's Well No. _____

Date Work Began 10/13/05, Ended 10/19/05

Local Permit Agency San Diego

Permit No. EWEL 116803 Permit Date 8/30/05

GEOLOGIC LOG

ORIENTATION (✓) X VERTICAL ___ HORIZONTAL ___ ANGLE ___ (SPECIFY)

DRILLING METHOD Air Rotary FLUID _____

DEPTH FROM SURFACE Ft.	to Ft.	DESCRIPTION (Describe material, grain size, color, etc.)
0	10	Top Soil
10	40	D.G.
40	45	Gray • Rose Granite
45	50	Fractured Gray • Rose Granite Water: 1 GPM
50	175	Gray • Rose Granite
175	180	Fractured B/W Granite
180	620	B/W Granite
620	640	Fractured B/W Granite Water: 10 GPM Total
640	810	B/W Granite

Completed Well Construction

Date 7/11/06

Date Inspected 7/11/06

Comments N 33.19167 X W 116.973330 el 1592'

Water Sample Taken? N

Reviewed By N Sedany

TOTAL DEPTH OF BORING 810' (Feet)

TOTAL DEPTH OF COMPLETED WELL 810 (Feet)

WELL OWNER

Name Joe Alvarez

Mailing Address 1215 Jefferson Avenue

City Escondido, CA 92027 (STATE ZIP)

WELL LOCATION

Address Lake Wohlford Road

City Valley Center, CA 92082.

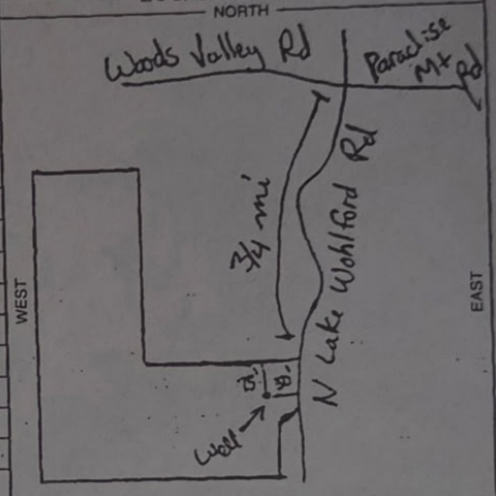
County San Diego

APN Book 190 Page 040 Parcel 11

Township 11S Range 1W Section 27

Lat ___ N (DEG. MIN. SEC.) Long ___ (DEG. MIN. SEC.)

LOCATION SKETCH



Illustrate or Describe Distance of Well from Roads, Buildings, Fences, Rivers, etc. and attach a map. Use additional paper if necessary. PLEASE BE ACCURATE & COMPLETE.

ACTIVITY (✓)

X NEW WELL

MODIFICATION/REPAIR

___ Deepen

___ Other (Specify)

___ DESTROY (Describe Procedures and Mater. Under "GEOLOGIC LC

USES (✓)

WATER SUPPLY

X Domestic ___ Public

X Irrigation ___ Indust

MONITORING ___

TEST WELL ___

CATHODIC PROTECTION ___

HEAT EXCHANGE ___

DIRECT PUSH ___

INJECTION ___

VAPOR EXTRACTION ___

SPARGING ___

REMEDIATION ___

OTHER (SPECIFY) ___

WATER LEVEL & YIELD OF COMPLETED WELL

DEPTH TO FIRST WATER 45' (Ft.) BELOW SURFACE

DEPTH OF STATIC WATER LEVEL Unkn (Ft.) & DATE MEASURED _____

ESTIMATED YIELD * 10 (GPM) & TEST TYPE Air Lift.

TEST LENGTH _____ (Hrs.) TOTAL DRAWDOWN _____ (Ft.)

* May not be representative of a well's long-term yield.

CASING (S)

DEPTH FROM SURFACE Ft.	to Ft.	BORE-HOLE DIA. (Inches)	TYPE (✓) BLANK	SCREEN	CON-DUCTOR	FILL PIPE	MATERIAL / GRADE	INTERNAL DIAMETER (Inches)	GAUGE OR WALL THICKNESS	SLOT SIZE IF ANY (Inches)
0	22	12	X				Steel	8	.188	

ANNULAR MATERIAL

DEPTH FROM SURFACE Ft.	to Ft.	TYPE: CE-MENT (✓)	BEN-TONITE (✓)	FILL (✓)	FILTER PACK (TYPE/SIZE)
0	22	✓			

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 Stelly Brothers Drilling, Inc. (PERSON, FIRM, OR CORPORATION) (TYPED OR PRINTED)

ADDRESS 13268 McNally Rd CITY Valley Center STATE CA ZIP 9208

Signed Paul Stelly C-57 LICENSED WATER WELL CONTRACTOR DATE SIGNED 11/4/05 C-57 LICENSE NUMBER 709686

DWR 188 REV. 05-03

IF ADDITIONAL SPACE IS NEEDED, USE NEXT CONSECUTIVELY NUMBERED FORM

OSP 03 7