

**QUADRUPLICATE**  
Use to comply with  
local requirements

STATE OF CALIFORNIA  
THE RESOURCES AGENCY  
DEPARTMENT OF WATER RESOURCES  
**WATER WELL DRILLERS REPORT**

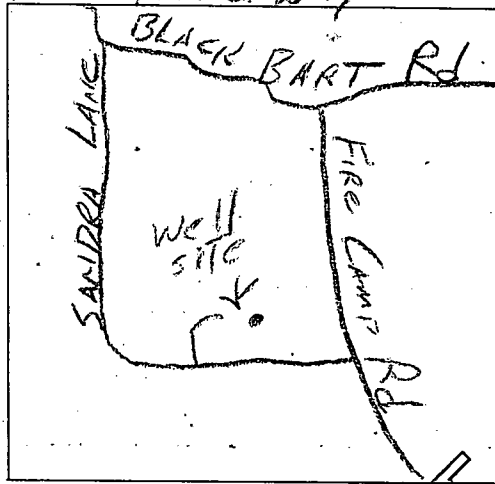
Do not fill in  
**No. 089258**

Notice of Intent No. \_\_\_\_\_  
Local Permit No. or Date 72-41-032

State Well No. \_\_\_\_\_  
Other Well No. \_\_\_\_\_

(1) **OWNER:** [REDACTED]  
Address [REDACTED]  
City [REDACTED] Zip [REDACTED]  
(2) **LOCATION OF WELL** (See instructions):  
County Bulle Owner's Well Number 1  
Well address if different from above SANDRA LANE  
Township 19N Range 5E Section 25  
Distance from cities, roads, railroads, fences, etc. 1/2 MILE WEST OF FIRE CAMP RD ON SANDRA LANE  
WELL SITE IS 100 YARDS NORTH OF ROADWAY

(12) **WELL LOG:** Total depth 220 ft. Depth of completed well 220 ft.  
from ft. to ft. Formation (Describe by color, character, size or material)  
0 - 21 - CLAY + BROKEN ROCK  
21 - 163 - HARD BLUE GRANITE  
163 - 154 - BROKEN STREAK  
154 - 191 - HARD BLUE GRANITE  
191 - 192 - BROKEN STREAK  
192 - 220 - HARD BLUE GRANITE



(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  Yes  No  Size \_\_\_\_\_  
Cable  Air  Diameter of bore \_\_\_\_\_  
Other  Bucket  Packed from \_\_\_\_\_ to \_\_\_\_\_  
(6) **GRAVEL PACK:**  
Type of perforation or size of screen \_\_\_\_\_  
(7) **CASING INSTALLED:**  
Steel  Plastic  Concrete   
(8) **PERFORATIONS:**

From ft.	To ft.	Dia. in.	Gage or Wall	From ft.	To ft.	Slot size
0	27	120				
0	220	120		80	220	1/8

(9) **WELL SEAL:**  
Was surface sanitary seal provided? Yes  No  If yes, to depth 27 ft.  
Were strata sealed against pollution? Yes  No  Interval \_\_\_\_\_ ft.  
Method of sealing CEMENT + BENTONITE

(10) **WATER LEVELS:**  
Depth of first water, if known 153 ft.  
Standing level after well completion 77 ft.

(11) **WELL TESTS:**  
Was well test made? Yes  No  If yes, by whom? Driller  
Type of test Pump  Bailer  Air lift   
Depth to water at start of test \_\_\_\_\_ ft. At end of test \_\_\_\_\_ ft.  
Discharge 5 gal/min after 3 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

Work started JAN 9 86 19 86 Completed JAN 10 86 19 86  
**WELL DRILLER'S STATEMENT:**  
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.  
SIGNED THOMAS H. KRUE (Well Driller)  
NAME THOMAS H. KRUE DRILLING CO  
(Person, firm, or corporation) (Typed or printed)  
Address P.O. Box 1026  
City OROVILLE, CA 95965  
License No. 209738 Date of this report JAN 10, 1986