

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

Well # 7

Do not fill in

No. 082773

Notice of Intent No. _____
 Local Permit No. or Date _____

State Well No. _____
 Other Well No. _____

1) OWNER: Name **Don Harris**
 Address [Redacted]
 City _____ Zip **93710**

2) LOCATION OF WELL (See instructions):
 County **Fresno** Owner's Well Number _____
 Well address if different from above _____
 Township **11-S** Range **21-E** Section **8**
 Distance from cities, roads, railroads, fences, etc.
Millerton Road

(12) WELL LOG: Total depth **600** ft. Depth of completed well **600** ft.
 from ft. to ft. Formation (Describe by color, character, size or material)

0' - 6'	top soil
6' - 32'	clay
32' - 80'	broken schist
80' - 600'	schist rock
-	breaks:
106'	schist, water
118'	schist
123'	quartz
153'	oxidized schist
162'	quartz
180'	schist
188'	oxidized schist, water
218'	schist
229'	oxid. schist & quartz, w
250'	schist
260'	schist, water
272'	schist
278'	schist
285'	quartz
310'	quartz
326'	schist, water
340'	schist
440'	schist, water

(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

WELL LOCATION SKETCH

5) EQUIPMENT:
 Rotary Reverse
 Cable Air
 Other Bucket

(6) GRAVEL PACK:
 Yes No Size _____
 Diameter of bore _____
 Packed from _____

7) CASING INSTALLED:
 Steel Plastic Concrete
 From ft. To ft. Dia. in. Casing or Wall

0	82	10"	10
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Open hole dia. 7.5"

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

From ft.	To ft.	Slot size

10/26/90 & 10/29/90 Opened up borehole to -10" diameter to total depth of 490'

3) WELL SEAL:
 Was surface sanitary seal provided? Yes No If yes, to depth **50** ft.
 Were strata sealed against pollution? Yes No Interval _____ ft.
 Method of sealing **cement grout**

10) WATER LEVELS:
 Depth of first water, if known **106** ft.
 Standing level after well completion _____ ft.

11) WELL TESTS:
 Was well test made? Yes No If yes, by whom? _____
 Type of test **approx. 250 GPM Air Test During Drilling**
 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

Work started **10-24-80** 19____ Completed **11-19-80**
 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 _____ (Well Driller)
 NAME **Johnson Drilling Co.**
 Address **23489 E. Kings Canyon**
 City **Reedley, Ca.** Zip **93654**
 License No. **245802** Date of this report **11-25-80**