



COUNTY OF SAN LUIS OBISPO HEALTH AGENCY  
 ENVIRONMENTAL HEALTH SERVICES DIVISION  
 2156 SIERRA WAY, STE. B SAN LUIS OBISPO, CA 93401  
 PHONE: (805)781-5544 EMAIL: EHS@CO.SLO.CA.US  
 www.slocounty.ca.gov/ehs

OFFICE USE	
Permit No.	_____
Submittal Complete	<input type="checkbox"/>
Date	____/____/____
WP No.	_____
Invoice No.	_____
Scanned	____/____/____

## WELL PERMIT APPLICATION

FOR CONSTRUCTION, REPAIR, OR MODIFICATION OF WATER WELLS

<b>Construction</b>	<b>Repair/Modification</b>	<b>Replacement</b>
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### SITE INFORMATION

Proposed Well Site Address \_\_\_\_\_ City or Area \_\_\_\_\_  
 Assessor's Parcel Number \_\_\_\_\_ GPS \_\_\_\_\_ N \_\_\_\_\_ W \_\_\_\_\_  
 Site served by a water company, agency or district?    No    Yes    Water Co. Name \_\_\_\_\_

### PROPERTY OWNER INFORMATION

Property Owner Name \_\_\_\_\_  
 Mailing Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
 Telephone Number \_\_\_\_\_ Email \_\_\_\_\_

### WELL OWNER INFORMATION (If Different From Property Owner)

Well Owner Name \_\_\_\_\_  
 Mailing Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
 Telephone Number \_\_\_\_\_ Email \_\_\_\_\_

### WELL CONSULTANT INFORMATION

Consultant Name \_\_\_\_\_ Telephone Number \_\_\_\_\_  
 Email \_\_\_\_\_

### WELL DRILLER INFORMATION

Drilling Contractor Name \_\_\_\_\_ C-57 License No. \_\_\_\_\_  
 Drilling Company Name \_\_\_\_\_ Telephone Number \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 Fax \_\_\_\_\_ Email Address \_\_\_\_\_

I hereby agree to comply with all applicable laws and regulations of the County of San Luis Obispo and the State of California pertaining to well construction, destruction, repair, or modification and to the payment of any additional fees to complete any required environmental or technical review of the application. Within sixty days after completion of the well, I will furnish Environmental Health Services with a well completion report and water quality test results. The application becomes a valid permit following sign off by Environmental Health.

### DRILLING SHALL NOT COMMENCE UNTIL THIS APPLICATION IS APPROVED

Contractor Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Contractor Printed Name \_\_\_\_\_  
 Property Owner Signature \_\_\_\_\_ Date \_\_\_\_\_

### FOR OFFICE USE ONLY

RECEIVED BY \_\_\_\_\_ DATE \_\_\_\_\_ FEE PAID \$ \_\_\_\_\_ CK/CC# \_\_\_\_\_  
 WELL SITE VERIFIED: YES  NO  BY \_\_\_\_\_ DATE \_\_\_\_\_  
 WELL SITE VERIFIED GPS COORDINATES \_\_\_\_\_ N \_\_\_\_\_ W \_\_\_\_\_  
 SITE LETTER DATE \_\_\_\_\_ **PERMIT EXPIRATION DATE** \_\_\_\_\_  
 COMMENTS \_\_\_\_\_  
 CONDUCTOR CASING SEAL WITNESSED YES  NO  BY \_\_\_\_\_ DATE \_\_\_\_\_ DEPTH \_\_\_\_\_  
 WELL SEAL WITNESSED YES  NO  BY \_\_\_\_\_ DATE \_\_\_\_\_ DEPTH \_\_\_\_\_  
 BOREHOLE DESTRUCTION/SEAL WITNESSED YES  NO  BY \_\_\_\_\_ DATE \_\_\_\_\_ DEPTH \_\_\_\_\_  
 WELL SEAL GPS COORDINATES \_\_\_\_\_ N \_\_\_\_\_ W \_\_\_\_\_  
 WELL COMPLETION REPORT RECEIVED DATE \_\_\_\_\_ WATER QUALITY TEST RESULTS RECEIVED DATE \_\_\_\_\_ FINAL LETTER SENT DATE \_\_\_\_\_

**WELL PROPOSAL DETAILS**

**Intended Use:** Domestic Private    Irrigation    Agriculture    Commercial    Public/Community Water System

Public Water System Name \_\_\_\_\_ Contact \_\_\_\_\_  
(If Different From Owner)

Is proposed well located within city limits?    No    Yes, name of city \_\_\_\_\_

**Parcel Size (acres):** \_\_\_\_\_ Coastal Zone    Lake Nacimiento    Sensitive Resource Area  
Paso Robles GWB    Edna GWB    Cuyama GWB    Los Osos GWB    Santa Maria GWB

Basin Name \_\_\_\_\_ Sub-Basin Name \_\_\_\_\_ Target Aquifer/Basin \_\_\_\_\_

- 1) Do you anticipate drilling into a water bearing formation that has the potential to degrade a higher quality aquifer?  
No    Yes
- 2) Do you anticipate encountering soil conditions between ground surface and groundwater other than those described in State Well Standard 8.A?    No    Yes
- 3) Are there any other conditions that may render inadequate the minimum horizontal separation distances identified in State Well Standard 8.A to ensure that the well does not result in deterioration of groundwater quality?    No    Yes
- 4) Are there any areas with known or suspected soil or water pollution or contamination for which a certain horizontal separation distance may need to be established in order to ensure that the well does not result in deterioration of groundwater quality despite the increased 50 foot minimum seal depth identified in the County Code?    No    Yes

**If, during well construction, you encounter any soil or other conditions or water pollution or contamination that would modify your answer to any of the above questions, you must cease drilling immediately and notify Environmental Health Services of the changed circumstances.**

**WELL CONSTRUCTION DETAILS**

**Drilling Method:** Mud Rotary    Air Rotary    Reverse Rotary    Cable Tool    Other \_\_\_\_\_

**Exploration Hole:** Exploration/Borehole Depth \_\_\_\_\_ ft.    Exploration/ Borehole Diameter \_\_\_\_\_ in.

**Conductor Casing:** Conductor Depth \_\_\_\_\_ ft.    Diameter \_\_\_\_\_ in.    Material \_\_\_\_\_    Seal Depth \_\_\_\_\_ ft.

**Boring:** Boring Depth \_\_\_\_\_ ft.    Boring Diameter \_\_\_\_\_ in.

**Well Casing:** Production Casing Depth \_\_\_\_\_ ft.    Diameter \_\_\_\_\_ in.    Gravel Pack/ Gravel Size \_\_\_\_\_

Thickness/Gauge/ASTM sched. \_\_\_\_\_    Steel    Plastic    Stainless    Other \_\_\_\_\_

**Annular Seal:** Depth \_\_\_\_\_ ft.    Neat Cement    Sand Cement \_\_\_\_\_ sack mix    Other \_\_\_\_\_

**Seal Method:** Pumped with tremie pipe    Other \_\_\_\_\_    Retardant/Accelerator (name) \_\_\_\_\_

**ATTACHMENTS**

Geologist letter attached:    Yes    No (Required for wells 800' or deeper OR equal to or deeper than the sub-area thresholds in the PRGWB or where the answer to question 1) is yes to evidence compliance with State Well Standard 13)

Other attachments:    Construction Plan/Diagram    Land Use Permit    Coastal Zone Permit

Other, please explain \_\_\_\_\_

**Costs incurred by this office for consultant services for technical review of proposals shall be billed to the driller at direct cost.**

**WELL PROPOSAL/CONSTRUCTION MODIFICATIONS    NOTE: NOT APPROVED UNTIL SIGNED BELOW**

Date: \_\_\_\_\_ Description: \_\_\_\_\_

**FOR OFFICE USE ONLY—PROJECT MODIFICATIONS EVALUATION**

Received By: \_\_\_\_\_ Evaluated By: \_\_\_\_\_ Date: \_\_\_\_\_

Approved     Denied     Approved with Comments: \_\_\_\_\_

**COMPLETE AND ATTACH REQUIRED SCALED PLOT PLAN AND ANY REQUIRED LAND USE PERMITS OR GEOLOGIC REPORTS AS APPLICABLE**

# WELL PERMIT PLOT PLAN



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SCALE: 1/4" = 25'

INDICATE BELOW THE EXACT LOCATION OF PROPOSED WELL WITH RESPECT TO THE EXISTENCE OF ANY OF THE FOLLOWING ITEMS WITHIN A **200 FOOT RADIUS**: PROPERTY LINES; EASEMENTS; WATER BODIES OR WATER COURSES; DRAINAGE PATTERN; ROADS; EXISTING WELLS; SEWERS AND PRIVATE SEWAGE DISPOSAL SYSTEMS, ANIMAL ENCLOSURES AND ANY OTHER POTENTIAL SOURCES OF POLLUTION AND CONTAMINATION IDENTIFIED IN STATE STANDARD 8.A; AND ANY AREAS WITH KNOWN OR SUSPECTED SOIL OR WATER POLLUTION OR CONTAMINATION. INCLUDE DIMENSIONS. ALL PROPOSED WELL SITES SHALL BE DESIGNATED WITH A FLAGGED SURVEYOR'S STAKE LABELED "WELL SITE." DRILLING SHALL NOT COMMENCE UNTIL THIS APPLICATION IS APPROVED.

A large grid for plotting well locations. The grid is composed of 20 columns and 20 rows of squares. In the top-left corner of the grid, there is a compass rose with four cardinal directions labeled: 'N' for North, 'S' for South, 'E' for East, and 'W' for West. The grid is intended for the user to mark the location of a proposed well and any other features within a 200-foot radius.

Directions to site: \_\_\_\_\_

Gate code(s) and survey contact information: \_\_\_\_\_