

COUNTY OF REVERSID
DEPARTMENT OF HEALTH SERVICES
ENVIRONMENTAL HEALTH SERVICES DIVISION
3636 University Ave.
Riverside, CA 92501
(714) 787-6543

Permit A16672
CK #2419

APPLICATION FOR WELL PERMIT

OWNERSHIP

Owner Name: F. L. HUTCHINS
Owner Address: 44240 E. BENTON RD
SAGE

DRILLER

Driller Name: A&B
WATER WELL
Driller Address: DRILLING INC.
4201 AVENIDA ALVARADO, TEMECULA, CA 92590

RECEIVED
JUN 13 1990
Ans'd

LEGAL DESCRIPTION

1/4 1/4 Section 4 Township 7 South Range 1 East

Assessor's Parcel Number: _____ (Optional)

Note: State law requires that Section, Township and Range be provided on each well permit issued. If you cannot locate this information, please make sure you fill in the Assessor's Parcel Number as a second source of reference.

PHYSICAL ADDRESS OF WELL

DESCRIBE: 44240 EAST BENTON RD HEMET, CAL
99343 - So Portion of Acreage

Same as Owner's Address: Yes No

PERMIT FEE

A \$50.00 fee for each well permit is included with this application.

*Please send to the attention of Tina Leaf.

Well # 1

COUNTY OF RIVERSIDE DEPARTMENT OF HEALTH - DIVISION OF ENVIRONMENTAL HEALTH

WELL DRILLING PERMIT

Nº 16672

ALL ELECTRICAL, PLUMBING, MECHANICAL, AND STRUCTURAL REPAIRS AND INSTALLATIONS SHALL BE DONE UNDER PERMIT FROM RIVERSIDE COUNTY DEPT. OF BUILDING AND SAFETY.

Date	June 13,	7723	50.00
		16672 80	
Fee	\$50.00	TOTAL	50.00
		CHECK	50.00
		CHANGE	0.00

This permit is granted on condition that the person named in the permit will comply with the laws, ordinances and regulations that are now or may hereafter be in force.

06/13/90 14:29

CHARLENE

LOCATION OF PROPOSED WELL _____ ¼ _____ ¼; Sec. 4; T. 7S; R. 1E

PHYSICAL ADDRESS OF WELL 44240 East Benton Rd. Community Hemet

NAME F.L. Hutchins

DRILLER

A & B Drilling
42041 Avenida Alvarado
Temecula, Ca. 92390

MAILING ADDRESS 44240 E. Benton Rd.

CITY & STATE Sage, Ca.

By Charlene Robbins

Charlene Robbins

DCH-SAN-025 (Rev. 9/88)

Well #1

QUADRUPPLICATE
Use to comply with
all requirements

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

Do not fill in

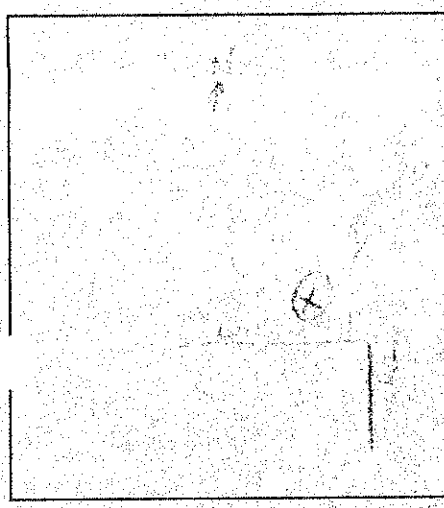
No. 338086

Notice of Intent No. _____
Local Permit No. or Date 16672

State Well No. _____
Other Well No. _____

(1) OWNER: Name F.L. Hutchins
Address 13340 E. Benton Road
City Sage, CA ZIP _____
(2) LOCATION OF WELL (See instructions):
County Riverside Owner's Well Number _____
Well address if different from above _____
Township 7S Range 1E Section 4
Distance from cities, roads, railroads, fences, etc. _____

(12) WELL LOG: Total depth <u>200</u> ft. Completed depth <u>200</u> ft.	
from ft.	to ft. Formation (Describe by color, character, size or material)
0	120 Decomposed Granite
120	162 BLACK & WHITE GRANITE
162	163 FRACTURE
163	169 BLACK & WHITE GRANITE
169	172 Fracture
172	194 BLACK & WHITE GRANITE
194	197 FRACTURE
197	200 BLACK & WHITE 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
Municipal
Other (Describe)

WELL LOCATION SKETCH

(5) EQUIPMENT:
Rotary Reverse
Cable Air
Other Bucket

(6) GRAVEL PACK:
Yes No
Size 3/28
Diameter of bore 200 50
Packed from _____ ft.

(7) CASING INSTALLED:

From ft.	To ft.	Dia. in.	Gage or Wall
200	Top	4"	160

(8) PERFORATIONS:

From ft.	To ft.	Slot size
200	160	5/32

(9) WELL SEAL:
Was surface sanitary seal provided? Yes No If yes, to depth 20 ft.
Were strata sealed against pollution? Yes No Interval _____ ft.
Method of sealing CEMENT

(10) WATER LEVELS:
Depth of first water, if known 70 ft.
Standing level after well completion _____ 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 _____ gal/min after 4 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 7/24 1990 Completed 7/25 1990

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 A & B WATER WELL DRILLING, INC.
(Person, firm or corporation) (Typed or printed)
Address 42041 Avenida Alvarado
Temecula, CA ZIP 92390
City 564580 License No. _____ Date of this report 8/13/90

Original

COUNTY OF RIVERSIDE DEPARTMENT OF HEALTH - DIVISION OF ENVIRONMENTAL HEALTH

WELL DRILLING PERMIT No 10245

ALL ELECTRICAL, PLUMBING, MECHANICAL, AND STRUCTURAL REPAIRS AND INSTALLATIONS SHALL BE DONE UNDER PERMIT FROM RIVERSIDE COUNTY DEPT. OF BUILDING AND SAFETY.

Date February 27, 1990
Fee \$50.00

This permit is granted on condition that the person named in the permit will comply with the laws, ordinances and regulations that are now or may hereafter be in force.

LOCATION OF PROPOSED WELL W 1/4 Sec. 4 T. 7S R. 16

PHYSICAL ADDRESS OF WELL 44135 Perryman Lane Community Hemet
APN: 571-030-037-0

NAME Weber Valley Heights Assn. DRILLER I. O. Lynch Well Drilling, Inc.

MAILING ADDRESS 44135 Perryman Lane P.O. Box 1926
Hemet, Ca. 92343

CITY & STATE Hemet, Ca. 92343

by Charlene Robbins
Charlene Robbins

DOHSAM-028 (Rev. 8/89)

COUNTY OF RIVERSIDE
DEPARTMENT OF HEALTH SERVICES
ENVIRONMENTAL HEALTH SERVICES DIVISION
4065 COUNTY CIRCLE DRIVE - P.O. BOX 7600
RIVERSIDE, CALIFORNIA
92513-7600

original

OK # 397
Permit #
16245

APPLICATION FOR WELL PERMIT

DATE: February 26, 1990

OWNERSHIP:

Owner Name: Weber Valley Heights Assn.

Owner Address: 44135 Perryman Lane
Hemet, CA 92343

DRILLER:

Driller Name: L.O. LYNCH WELL DRILLING & SUPPLY, INC.

Driller Address: P.O. BOX 1920
HEMET, CA 92343

RECEIVED

FEB 27 1990

LEGAL DESCRIPTION:

 $\frac{1}{4}$ $\frac{1}{4}$ Section 4 Township 7S Range

Assessor's Parcel Number: 571 - 030 - 037 (- 0)

County of Riverside
Department of Health
Environmental Health
Services Division

OK/SLW/LEB
2/27/90

lot 3 - RS 53/47

Note: State law requires that Section, Township and Range be provided on each well permit issued. If you cannot locate this information, Please make sure you fill in the Assessor's Parcel Number as a second source of reference.

PHYSICAL ADDRESS OF WELL

Same as Owner's address above? XX Yes No (If not the same, fill in the space below.)

ADDRESS/COMMUNITY WHERE WELL IS BEING DUG:

PERMIT FEE:

A \$50.00 fee for each well permit is required.
* Please send to the attention of the "Water/Well Desk".