State of California

Well Completion Report Form DWR 188 Submitted 3/23/2022 WCR2022-003346

Owner's Well Number	Date Work	Began 02/03/2022	Date Work Ended 02	2/03/2022	
Local Permit Agency Sonoma Cour	nty Permit & Resource Management	 Department			
Secondary Permit Agency	Permit	Number WEL21-0669	Permit Date 12	2/29/2021	
Well Owner (must remain	confidential pursuant to	Water Code 13752	2) Former U	Jse	
Name Melanie Garner			Activity Destroy		
Mailing Address 7180 Highway 11	6		Former Use Water Supply		
				.,	
City Forestville	State	Ca Zip 95436			
	Wel	I Location			
Address 3401 Moriconi DR			APN 034-150-011		
City Santa Rosa	Zip 95401 County	Sonoma	Township 07 N		
Latitude 38 27 30	0.15 N Longitude -122	48 6.16 W	Range 09 W		
Deg. Min. Se	ec. Deg.	Min. Sec.	Section 13		
Dec. Lat. 38.458375	Dec. Long122.801	7111	Baseline Meridian Mount Diablo Ground Surface Elevation		
Vertical Datum	Horizontal Datum WGS	84	Elevation Accuracy		
Location Accuracy	Location Determination		Elevation Determination Method		
	— Method				
Borehole	Information	Water I	_evel and Yield of Comple	eted Well	
Orientation Vertical	Specify	Depth to first water	er (Feet below	v surface)	
Drilling Method	 Drilling Fluid	Depth to Static	(-)		
	<u> </u>	Water Level	(Feet) Date Measur	red	
Total Depth of Boring	Feet	Estimated Yield* Test Length	(GPM) Test Type (Hours) Total Drawdo	own (feet)	
Total Depth of Completed Well 45	Feet		esentative of a well's long term yield.	(leet)	
Destruction Details: Abandoned 6" X 45' steel cased well finish with native to grade	per Sonoma County requirements. P	erforate casing 30' to surfa	ace. Tremie cement bottom to 3'bg. C	Cut casing bg and	
Other Observations:					

Borehole Specifications				
Depth from Surface Feet to Feet	Borehole Diameter (inches)			

	Certification Statement							
11	I, the undersigned, certify that this report is complete and accurate to the best of my knowledge and belief							
	Name WEEKS DRILLING AND PUMP CO							
1	Person, Firm or Corporation							
PO BOX 176 SEBASTOPOL CA 94573-								
		Address	City	State	Zip			
	Signed	electronic signature received	_	177681 C-57 License Number				

Attachments
034-150-011.pdf - Location Map

<u> </u>								
DWR Use Only								
CSG#	State Well Number		Site Code		Loca	Local Well Number		
			N					w
Latitude Deg/Min/Sec				Longitude Deg/Min/Sec				
TRS:								
APN:								

