

ENVIRONMENTAL HEALTH



Drinking Water Program

5050 Commerce Drive, Baldwin Park, CA 91706

Telephone: (626) 430-5420 • Facsimile: (626) 813-3013 • Email: waterquality@ph.lacounty.gov http://publichealth.lacounty.gov/eh/ep/dw/dw_main.htm

TEST HOLES - SR0326850 - 302 East Carlisle Road. LA County CA, 91361 Work Plan Approval

VORK SITE AD	DRESS	CITY	ZIP	EMAIL ADDRESS FOR WELL PERMIT APPROVAL		
302 Ea	ast Carlisle Road	LA County	91361	vicswelldrilling@yahoo.com		
002 20		El t obdinty	01001	Pat@stonehavenranch.Org		
				<u>r augstonenavenranen. Org</u>		
		1	NOTICE:	i		
			NSIONS OF WORK PLAN APF ' FEES (HOURLY RATE AS AF	PROVALS ARE CONSIDERED ON AN INDIVIDUAL (CASE-BY-PLICABLE).		
			DLOGIC CONDITIONS ENCOU F PUBLIC HEALTH—DRINKIN	INTERED AT THE SITE INSPECTION ARE FOUND TO DIFFER		
NORK PLAN	APPROVALS ARE LIMITED	TO COMPLIANCE WITH THE	CALIFORNIA WELL STANDA	RDS AND THE LOS ANGELES COUNTY CODE AND DOES NO		
				CANT IS RESPONSIBLE FOR SECURING ALL OTHER APPROVALS, USE COVENANTS, ENCROACHMENT		
PERMISSION	S, UTILITY LINE SETBACKS	, CITY/COUNTY PUBLIC WO	RKS RIGHTS OF WAY, ETC.			
				BY THE DEPUTY HEALTH OFFICER. WORK SHALL NOT BE ALTH—DRINKING WATER PROGRAM.		
				DAYS BEFORE WORK IS SCHEDULED TO BEGIN.		
	TO BE C		NT OF PUBLIC HEALTH—DR			
	AN APPROVED	OMPLETED BT DEPARTMEN	(1-10 TEST HOLES)			
	AL APPROVAL COND	ITIONS:	(
			ubmitted to the Drinking	Water Program. Any modifications to the scope		
	work will require addition					
	bes/casings from one a		s) to be sealed to separ	ate well casing, gravel tube, sounding tube or othe		
			nt. proceeding upward f	rom the bottom of the boring.		
				uirements published in the California Well Standard		
			Code and all other app			
		eport/log to phabib@ph	.<i>lacounty.gov</i> within 30	days from the date its construction/destruction is		
	mpleted.					
	 Drillers shall submit their well completion reports to the Department of Water Resources through the Online System of Well Completion Reports (OSWCR) at https://civicnet.resources.ca.gov/DWR_WELLS. 					
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V	CALIFORNIA ST					
	5770		s Peter	The fill		
REH		Peter Habib, REH	s <i>Felet</i> ?	Tavco		
	EAL FINAL INSPECTION			ETION LOG REQUIRED		

DATE ACCEPTED: REHS signature	DATE ACCEPTED: REHS signature	
WATER QUALITY—BACTERIOLOGICAL STANDARDS REQUIRED DATE ACCEPTED: REHS signature	WATER QUALITY—CHEMICAL STANDARDS REQUIRED DATE ACCEPTED: REHS signature	
WATER SUPPLY YIELD REQUIRED DATE ACCEPTED: REHS signature	OTHER REQUIREMENT DATE ACCEPTED: REHS signature	