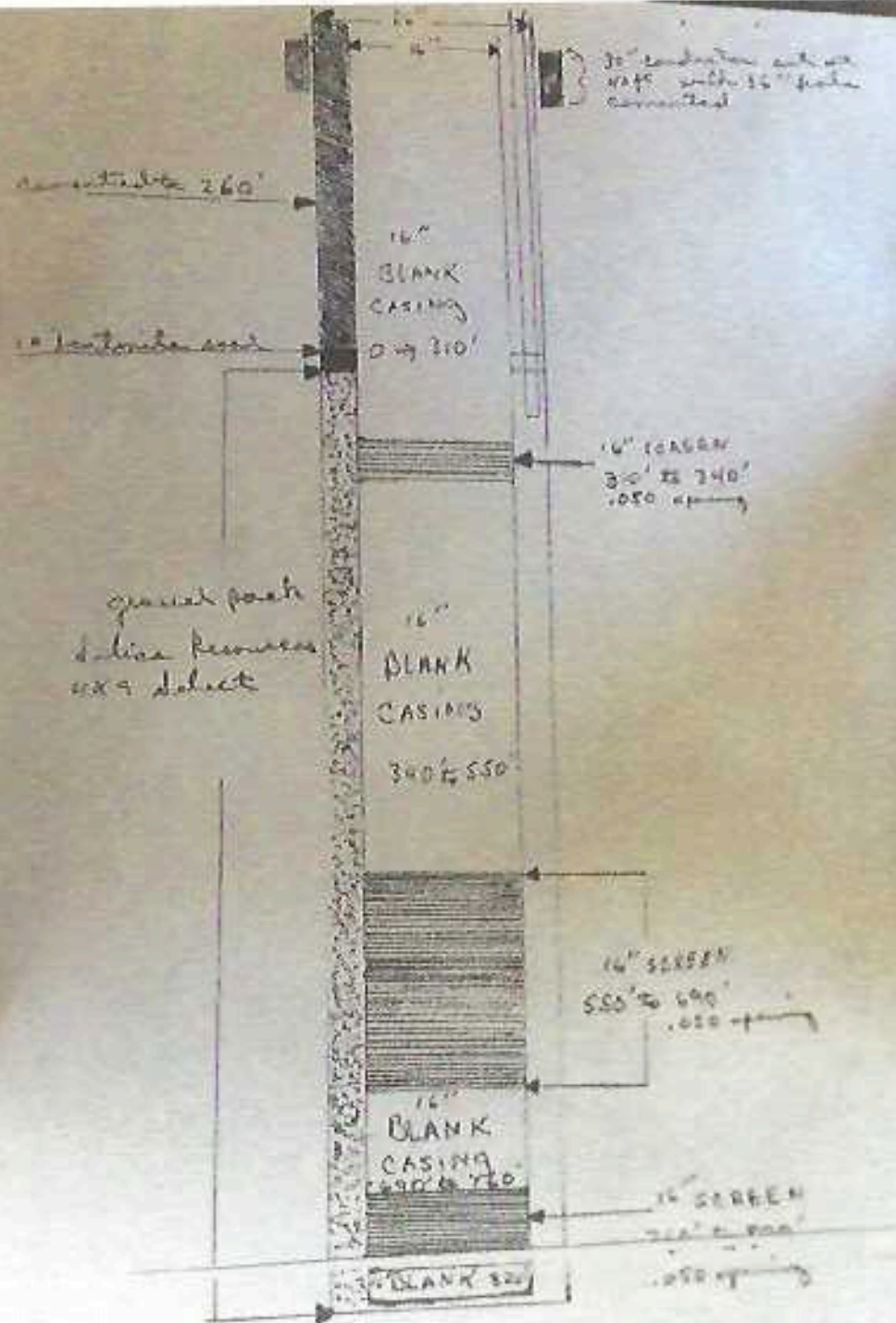


PUMPTURB



WELL IS 900' DEEP
 PUMP IS SET AT 240'
 WELL CAN PRODUCE 2,000 gpm
 WELL PRODUCES
 1,500/gallons per
 minute
 BUT GEARED AT
 700/gallons per
 minute

County of Ventura
WELL PERMIT APPLICATION
 800 South Victoria Avenue, Ventura CA 93009

5051

Permit No. _____

NAME OF WELL OWNER ERIC + DONNA JOHANSON	OWNER ADDRESS (Street, City, ZIP) 13215 OLD BUTTERFIELD RD. CARMEL CA 95010
OWNER TELEPHONE NUMBER (805) 491-2428	NAME OF WELL DRILLER BARBOUR WELL SINKING CORP.
	LICENSE NUMBER 627325

I hereby agree to comply with all regulations pertaining to well construction, repair, modification and destruction. Within 30 days of completion of work, I will furnish the Ventura County Public Works Agency, Water Resources and Engineering Department, Water Resources Division with a complete and accurate log of the well. Any modification of this permit requires approval by the Director. Call (805) 654-2907 or (805) 654-2904. When signed by the Director of Public Works, this application is a permit.

Applicant's Signature: [Signature] Date: 11/27/01

Owner Driller Consultant (List Firm and Phone Number) (805) 482-4788

Estimated Dates of Work: Start 11/30/01 Completion 12/30/01 FAX: (805) 937-6538

TYPE OF WORK (Check)	USE (Check)	EQUIPMENT (Check)	WELL DEPTH	PROPOSED CASING
Water Supply Well <input checked="" type="checkbox"/>	Public <input type="checkbox"/> Domestic <input type="checkbox"/>	Air Rotary <input type="checkbox"/>	<u>100</u> FEET	Steel <input checked="" type="checkbox"/>
Repair or Modification <input type="checkbox"/>	Agricultural <input type="checkbox"/>	Mud Rotary <input checked="" type="checkbox"/>	DIAMETER	PVC <input type="checkbox"/>
Destruction <input type="checkbox"/>	LUFT Invert/Clear-up <input type="checkbox"/>	Hollow Stem <input type="checkbox"/>	WELL BORE	Other <input type="checkbox"/>
Monitoring (No. _____) <input type="checkbox"/>	Site Assess/Leak Detect <input type="checkbox"/>	Cable Tool <input type="checkbox"/>	<u>26</u> INCHES	Diameter <u>16</u>
Borehole (No. _____) <input type="checkbox"/>	Other _____ <input type="checkbox"/>	Other _____ <input type="checkbox"/>		Wall or Casing <u>1350</u>

PROPOSED SEALING ZONE(s)	SEALING MATERIAL (Check)	PERFORATIONS OR SCREEN
From <u>TBD</u> to _____ ft with _____	Neat Cement <input type="checkbox"/> Bentonite Chips <input type="checkbox"/>	From <u>400</u> to <u>600</u> FT
From <u>0</u> to <u>240</u> ft with <u>Cement Grout</u>	Cement Grout <input type="checkbox"/> Concrete <input checked="" type="checkbox"/>	From _____ to _____ FT
From _____ to _____ ft with _____	1:1 Sack/Yd ³ Mud <input type="checkbox"/> 16 Sack/Yd ³ Mud <input type="checkbox"/>	From _____ to _____ FT

Permit Start Date 11-29-01 \$ 610.00 FOR OFFICE USE Fee Paid On 10-31-01 Receipt No. 5033

Expiration Date 5-29-02 Date Sealed 12/7/01 Inspector's Signature [Signature]

Disposition of Application: Approved with condition: below Denied

Agency: CMA WPCD City _____ Other _____

Permit conditioned and checked by Linda Richardson Date 11-29-01

- CONDITIONS FOR NEW WELL:**
- All work must be performed by a well contractor licensed by the State of CA, and registered with Ventura Co.
 - Diameter of well borehole shall be at least 4 in. larger than outside diameter of casing, to the base of sealing.
 - During drilling operations the Contractor shall retain all drilling fluids and groundwater discharges within the drilling site. No fluids shall drain offsite to flood control channels, creeks, rivers, sewers or any watercourses.
 - A geophysical log shall be performed by resistivity, and shall be inspected by a Public Works Hydrologist to determine sealing requirements. Call (805) 654-2907 or 654-2904.
 - Concrete or Cement Grout annular sealing material shall be applied by means of a grout pipe placed within 2 ft. of the base of the sealing zone, depth to be determined.
 - Public Works Inspector shall be present during placement of all sealing material.
(NOTE: 24-hour advance notice is required: call (805) 654-2904 or 654-3660).
 - A water quality sample shall be collected near the end of the well development phase, after the maximum production rate and the desired water clarity has been achieved. Identify sample by the well permit number and submit to a State DOHS-approved laboratory for either General Mineral or Irrigation Suitability analysis.
 - A well log on an original CA Department of Water Resources (DWR) Well Completion Report form shall be submitted to this Department within 30 days after well sealing. A copy of the laboratory water quality report shall be submitted to this Department within 60 days after well sealing. Reference this permit number on reports.
Mail to: County of Ventura - Public Works Agency, Water Resources and Engineering Department, 800 South Victoria Avenue Ventura, CA. 93009-1600
- Public Works Director [Signature] Date 11-29-01

Permit 5051

04N19W280025

No. **735458**

Owner's Well No. 1

Date Work Began 11/29/01 Ended 1/25/02

Local Permit Agency County of Ventura

Permit No. 5051 Permit Date 11/29/01

DWELL USE ONLY - DO NOT FILL IN

STATE WELL NO./STATION NO.

LATITUDE LONGITUDE

APRTH/OTHER

ORIENTATION (±)			DRILLING METHOD		FLUID	
<input checked="" type="checkbox"/> VERTICAL <input type="checkbox"/> HORIZONTAL <input type="checkbox"/> ANGLE _____ (SPECIFY)			<u>Reverse rotary</u>		<u>Bentonite</u>	
DEPTH FROM SURFACE			DESCRIPTION			
ft.	in.	ft.	Describe material, grain size, color, etc.			
0		29	Silt, sand with some clay			
20		40	Gravel, sand and cobble			
40		82	Silt, sand and gravel			
82		222	Silt, shale (oil shows)			
222		340	Sand, gravel and some rock			
340		442	Brown/tan silt and sand			
442		500	Silty sand with some gravel			
500		690	Brown/tan sand and gravel			
690		764	Clay, silt and sand			
764		820	Sand and gravel			
820		900	Clay, silt and sand			

WELL OWNER

Name Eric and Donna Johnson

Mailing Address 13285 Old Butterfield Road
Camarillo CA 92010
CITY STATE ZIP

WELL LOCATION

Address Telegraph Road/Box 126

City Millmore

County Ventura

APN Book _____ Page _____ Parcel 055-0-150-040

Township _____ Range _____ Section _____

Latitude _____ NORTH Longitude _____ WEST

LOCATION SKETCH

TELEGRAPH RD. 1/4 MILE 126
MARKER 23 27/100 FLOWERS
APPROX. 150' NORTH OF HWY 126

ACTIVITY (±)

NEW WELL

MODIFICATION/REPAIR
— Deepen
— Other (Specify)

DESIGN (Describe Procedures and Materials Under "ITEMS TO LOG")

PLANNED USES (±)

WATER SUPPLY

Domestic: Farm Industrial

MONITORING

TEST WELL

CATHODIC PROTECTION

HEAT EXCHANGE

DIRECT FURN

IRRIGATION

VAPOR EXTRACTION

SPRINKLING

REMEDIATION

OTHER (SPECIFY)

WATER LEVEL & YIELD OF COMPLETED WELL

DEPTH TO FIRST WATER 28 (ft.) BELOW SURFACE

DEPTH OF STATIC WATER LEVEL 24 (ft.) & DATE MEASURED 1/25/02

ESTIMATED YIELD 2800 (GPM) & TEST TYPE Pump test

TEST LENGTH 1 (hr.) TOTAL DRAWDOWN 204 (ft.)

* May not be representative of a well's long-term yield.

DEPTH FROM SURFACE	BORE-HOLE DIA (inches)	CASING (S)				INTERNAL DIAMETER (inches)	GAUGE OR WALL THICKNESS	SLOT SIZE IF ANY (inches)	ANNULAR MATERIAL			
		TYPE (±)	MATERIAL / GRADE	DEPTH FROM SURFACE	DEPTH TO				TYPE	CEMENT (±)	BENTONITE (±)	FILL (±)
0	36		Steel	30	.312	0	240	Y				
0	310	X	Steel	16	.312	240	250		Y			
310	350	X	Steel	16	XXXXX	.050	250			X	36 gravel	
350	550	X	Steel	16	.312							
550	690	X	Steel	16	XXXXX	.050						
690	760	X	Steel	16	.312							

ATTACHMENTS (±)

Geologic Log

Well Construction Diagram

Geophysical Log(s)

Soil/Water Chemical Analyses

Other _____

ATTACH ADDITIONAL INFORMATION, IF IT EXISTS

CERTIFICATION STATEMENT

I, the undersigned, certify that this report is complete and accurate to the best of my knowledge and belief.

NAME Harbour Well Surveying Corporation
(PERSON, FIRM OR CORPORATION) (TYPE OR PRINT)

934 W. Verdulera St. Camarillo, CA 93010
CITY STATE ZIP

Signed _____ DATE SIGNED 2/13/02 EST. LICENSE NUMBER 627325

TRIPPLICATE
Owner's Copy

STATE OF CALIFORNIA
WELL COMPLETION REPORT
Refer to Instruction Pamphlet

BWM USE ONLY - DO NOT FILL IN

STATE WELL NO./STATION NO.	
LATITUDE	LONGITUDE
APN/OTHER	

Page 2 of 2

Owner's Well No. 1

No. **735459**

Date Work Began 11/29/01 Ended 1/25/02

Local Permit Agency County of Ventura

Permit No. 5051

Permit Date 11/29/01

GEOLOGIC LOG

WELL OWNER

ORIENTATION (✓) VERTICAL HORIZONTAL ANNEIT (Specify)

Name Eric and Donna Johanson

DREILING METHOD Reverse rotary FLUID Bentonite

Mailing Address 13285 Old Butterfield Road
Camarillo CA 93010
CITY STATE ZIP

DEPTH FROM SURFACE
FL. to FL. DESCRIPTION
Describe material, grain size, color, etc.

WELL LOCATION
Address Telegraph Road/Hwy 126
City Fillmore
County Ventura
APN Book _____ Page _____ Parcel 055-0-150-040
Township _____ Range _____ Section _____
Latitude _____ NORTH Longitude _____ WEST

SEE ATTACHED PAGE 1

LOCATION SKETCH

ACTIVITY (✓)

NEW WELL

MODIFICATION/REPAIR
 Deepen Other (Specify)

DESTROY (Destroy Procedures and Materials Under GSDM (ADG) (ADG))

PLANNED USES (✓)

WATER SUPPLY
 Domestic Public Irrigation Industrial

MINIUMED
TEST WELL
CATHODIC PROTECTION
HEAT EXCHANGE
DIRECT FURN
FLECTION
VAPOR EXTRACTION
SPARKING
REMEDIATION
OTHER (SPECIFY) _____

Illustrate or Describe Location of Well from Roads, Buildings, Farms, Rivers, etc. and attach a map. Use additional paper if necessary. **PLEASE BE ACCURATE & COMPLETE.**

SEE ATTACHED PAGE 1

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WATER LEVEL & YIELD OF COMPLETED WELL

DEPTH TO FIRST WATER 28 (FL) BELOW SURFACE

DEPTH OF STATIC 24 (FL) & DATE MEASURED 1/25/02

WATER LEVEL _____ (FL) & DATE MEASURED _____

ESTIMATED YIELD - 2800 (GPM) & TEST TYPE Pump test

TEST LENGTH 1 (Hr) TOTAL DRAWDOWN 204 (FL)

* May not be representative of a well's long term yield.

DEPTH FROM SURFACE FL. to FL.	BORE-HOLE DIA. (Inches)	TYPE (✓)				MATERIAL / GRADE	INTERNAL DIAMETER (Inches)	GAUGE OR WALL THICKNESS	SLOT SIZE IF ANY (Inches)
		BLANK	OPEN	CON.	SUBJECT				
760 to 800	26	X				Steel	16	XXXX	.050
800 to 820	26	X				Steel	16	.312	

DEPTH FROM SURFACE FL. to FL.	ANNULAR MATERIAL TYPE			
	CE. MENT (✓)	BEN. TONITE (✓)	FL. (✓)	FILTER PACK (TYPE/SIZE)

- ATTACHMENTS (✓)**
- Geologic Log
 - Well Construction Diagram
 - Geophysical Log(s)
 - Soil/Water Chemical Analysis
 - Other _____
- ATTACH ADDITIONAL INFORMATION, IF IT EXISTS

CERTIFICATION STATEMENT

I, the undersigned, certify that this report is complete and accurate to the best of my knowledge and belief.

NAME Barbour Well Surveying Corporation
(PERSON, FIRM OR CORPORATION) (TYPED OR PRINTED)

ADDRESS 934 W. Verdulera St. Camarillo, CA 93010
CITY STATE ZIP

DATE SIGNED 2/13/02 627325
DATE SIGNED U.S. LICENSE NUMBER

Signature _____
WELL DRILLING AUTHORIZED REPRESENTATIVE