

**ATTACHMENT 4A Well  
Permit Documents**



State of California  
**Well Completion Report**  
Form DWR 188 Submitted 5/7/2021  
WCR2021-005628

Owner's Well Number 1 Date Work Began 03/24/2021 Date Work Ended 04/30/2021  
Local Permit Agency Humboldt County Department of Health & Human Services - Land Use Program  
Secondary Permit Agency \_\_\_\_\_ Permit Number 20/21-0761 Permit Date 03/04/2021

Well Owner (must remain confidential pursuant to Water Code 13752)			Planned Use and Activity	
Name _____	Activity <u>New Well</u>			
Mailing Address _____	Planned Use <u>Water Supply Irrigation - Agriculture</u>			
City _____	State _____	Zip _____		

Well Location					
Address <u>47730 Mattole RD</u>			APN <u>107-054-036</u>		
City <u>Honeydew</u>	Zip <u>95545</u>	County <u>Humboldt</u>	Township <u>02 S</u>		
Latitude <u>40</u> <u>15</u> <u>34.477</u> <u>N</u>	Longitude <u>124</u> <u>6</u> <u>57.798</u> <u>W</u>		Range <u>01 E</u>		
Dec. Lat. <u>40.25957696</u>	Dec. Long. <u>-124.116055</u>		Section <u>31</u>		
Vertical Datum _____			Baseline Meridian <u>Humboldt</u>		
Horizontal Datum <u>WGS84</u>			Ground Surface Elevation _____		
Location Accuracy _____			Elevation Accuracy _____		
Location Determination Method _____			Elevation Determination Method _____		

Borehole Information		Water Level and Yield of Completed Well	
Orientation <u>Vertical</u>	Specify _____	Depth to first water <u>51</u> (Feet below surface)	
Drilling Method <u>Other - Under Ream</u>	Drilling Fluid <u>Air</u>	Depth to Static _____	
<u>Down Hole Hammer</u>		Water Level <u>43</u> (Feet)	Date Measured <u>04/30/2021</u>
Total Depth of Boring <u>200</u> Feet		Estimated Yield* <u>40</u> (GPM)	Test Type <u>Air Lift</u>
Total Depth of Completed Well <u>200</u> Feet		Test Length <u>4</u> (Hours)	Total Drawdown <u>149</u> (feet)
*May not be representative of a well's long term yield.			

Geologic Log - Free Form		
Depth from Surface Feet to Feet		Description
0	1	Top Soil
1	24	Brown Sand Stone
24	33	Silty Clay, Sand
33	47	Basalt (Rock) Floater
47	63	Brown Fractured sandstone & Blue Fractured Sandstone
63	181	Shale Mulache
181	200	Fractured Shale



## Casings

Casing #	Depth from Surface Feet to Feet		Casing Type	Material	Casings Specifications	Wall Thickness (inches)	Outside Diameter (inches)	Screen Type	Slot Size If any (inches)	Description
1	0	50	Blank	Low Carbon Steel	Grade: ASTM A53	0.188	6			
1	50	63	Screen	Low Carbon Steel	Grade: ASTM A53	0.188	6	Milled Slots	0.032	
1	63	180	Blank	Low Carbon Steel	Grade: ASTM A53	1.88	6			
1	180	200	Blank	Low Carbon Steel	Grade: ASTM A53	0.25	6			

## Annular Material

Depth from Surface Feet to Feet		Fill	Fill Type Details	Filter Pack Size	Description
0	20	Bentonite	Other Bentonite		Sanitary Seal
20	200	Filter Pack	Other Gravel Pack	3/8 inch	Pea Gravel

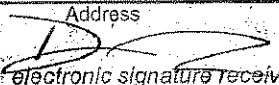
### Other Observations:

## Borehole Specifications

Depth from Surface Feet to Feet		Borehole Diameter (inches)
0	200	10

## Certification Statement

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

Name FISCH DRILLING  
 Person, Firm or Corporation  
3150 JOHNSON ROAD HYDEVILLE CA 95547  
 Address City State Zip  
 Signed  05/07/2021 683865  
 C-57 Licensed Water Well Contractor Date Signed C-57 License Number

## Attachments

Location Map.pdf - Location Map
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## DWR Use Only

CSG #	State Well Number	Site Code	Local Well Number
		N	W

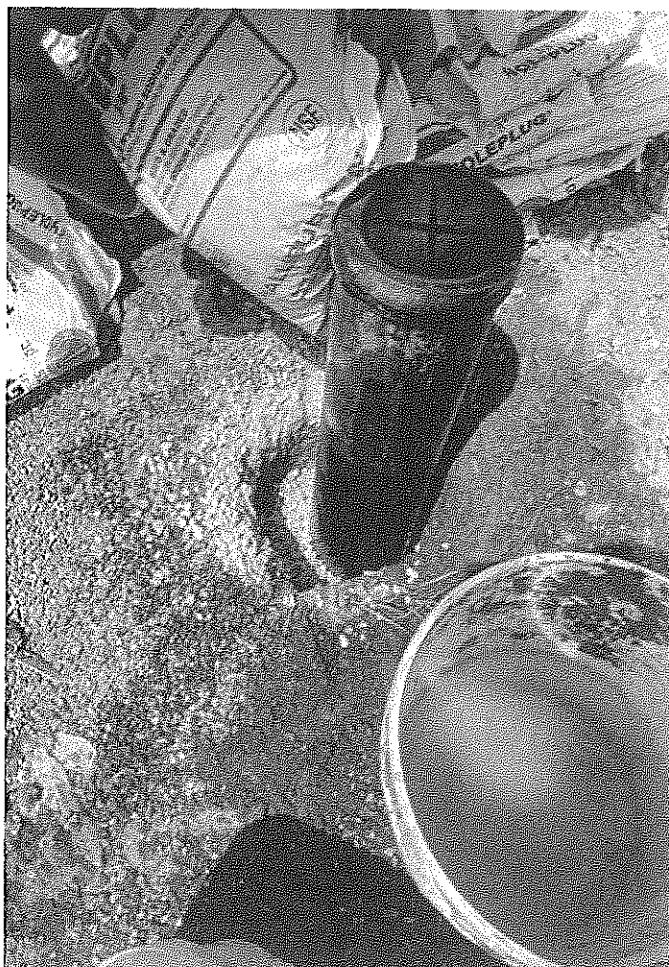
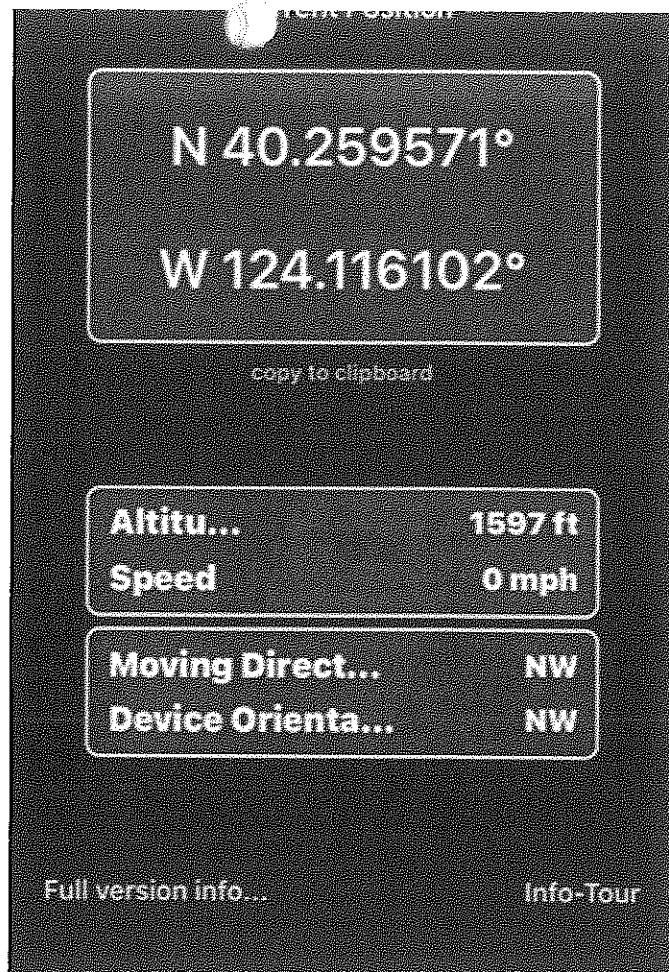
Latitude Deg/Min/Sec

Longitude Deg/Min/Sec

TRS:

APN:









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HUMBOLDT CO. DIVISION  
OF ENVIRONMENTAL HEALTH

Division of Environmental Health

100 H Street - Suite 100 - Eureka, CA 95501

Phone: 707-445-6215 - Toll Free: 800-963-9241

Fax: 707-441-5699

[envhealth@co.humboldt.ca.us](mailto:envhealth@co.humboldt.ca.us)

20/21-0761

**WATER WELL APPLICATION**

**CONSTRUCTION – REPAIR – DESTRUCTION**

The Well Permit will be returned to the property owner when approved by  
Humboldt County Division of Environmental Health (DEH)

Instructions:

1. Complete both sides and submit the Water Well Application with required fee. Include Well Driller's signature and property owner's signature.
2. Work on a well shall not be started prior to approval of the Water Well Application by DEH.
3. Any changes made to the location of a new well shall be approved by DEH prior to commencement of drilling.
4. Well Driller shall notify DEH a minimum of 24 hours prior to sealing the annular space.

Site Address	<u>47730 Mattole Rd.</u>	APN	<u>107-054-036</u>
City/State/Zip	<u>Honeydew</u>	CA	<u>95545</u>
Directions to Site	<u>See Map</u>		
Applicant	<u>FISCH DRILLING</u>	Contact	<u>CHRIS FISCH</u>
Mailing Address	<u>3150 JOHNSON ROAD</u>	Work Phone	<u>707-768-9800</u>
City/State/Zip	<u>HYDESVILLE, CA 95547</u>	Cell Phone	
Property Owner	<u>Evan Kouchalakos</u>	Home Phone	<u>213-503-9067</u>
Mailing Address	<u>PO Box 147</u>	Work Phone	
City/State/Zip	<u>Phillipsville, CA 95559</u>	Cell Phone	<u>603-930-6600</u>
I hereby grant 'right-of-entry' for inspection purposes _____			
Drilling		C-57	
Contractor	<u>FISCH DRILLING</u>	License #	<u>683865</u>
I hereby agree to comply with all laws and regulations of the County of Humboldt and the State of California Department of Water Resources Bulletin 74 pertaining to water well construction. I will contact Humboldt County Division of Environmental Health (DEH) when I commence work. Within 30 days after completion of work, I will furnish DEH a report of the work performed.			
Well Driller Signature:	<u>Chris Fisch</u>		
Would driller like a copy of approved application?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
<input type="checkbox"/> U.S. Mail address:			
<input checked="" type="checkbox"/> Email address:	<u>waterwells@fischdrilling.com</u>		
Type of Application:	Construction:	Intended Use:	
<input checked="" type="checkbox"/> Construction	Estimated Depth (ft.)	<input type="checkbox"/> Domestic - private	
<input type="checkbox"/> Destruction	Diameter (in.)	<input type="checkbox"/> Community Supply	
<input type="checkbox"/> Repair/Modification	Depth of Seal (ft.)	<input checked="" type="checkbox"/> Irrigation	
	Sealing Material	<input type="checkbox"/> Other _____	
	<u>BENTONITE</u>		



Estimated Work Dates:

Casing:

Type of Sewage System:

Start \_\_\_\_\_

Diameter (in.) 5"

☐ Community Sewer

☒ OWTS (Septic)

Completion \_\_\_\_\_

Material PVC

Distance from well site  
to OWTS 267'

**Special Requirements/Comments:**

Lat 40.25957696 Long -124.1160550

Project is statutory exempt as a ministerial approval. All  
Setbacks and seal design meet the explicit requirements  
of HCC and CA well standards.

**PLOT PLAN**

✓ # 18275 **FOR OFFICE USE ONLY**

Fee: \$373

Date: 2-16-21

Receipt: 658358

Project #: 20/21-0761

Paid by: Fisch Drilling

Site Approved by: J. Whitting

Site Approved Date: 3/3/21

Sealed to Depth of: 20'

Seal observed: ☐ Yes ☒ No

Final Approved Date: 5/18/21



# Proposed Well Site Map

APN - 107-054-036

Property Boundary

Structure

Site

Measurement

Road

Permanent  
Seasonal  
Trail

Watercourse

Class I  
Class II  
Class III

Property Location  
This property is located off of  
Mattole Road near  
Honeydew, CA

Directions from Fortuna, CA

Take ramp left and follow signs for US-101 South  
23.2 mi, 21 min

At exit 663, take ramp right toward Founders Tree Rockefeller Forest  
Bear right onto Mattole Rd

Follow Mattole Road for approximately 20 miles.

You reach HoneyDew you have gone too far.

Residence Septic

Proposed Well Location  
40-25957696, -124-1160550

Property Access  
Locked Gate  
40-25932997, -124-1152160

107-054-036-000



Scale : 1" = 300'









## Division of Environmental Health

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Fax: 707-441-5699  
envhealth@co.humboldt.ca.us

### AUTHORIZATION FOR ACCESS TO PROPERTY

*This form may be used in lieu of obtaining property owner's 'right of entry' authorization. Property owner's authorization must be received by Environmental Health prior to permit issuance.*

I authorize the Department of Health and Human Services, Division of Environmental Health, access to my property for the following:

- ☒ water well inspection  
☐ onsite wastewater treatment system inspection  
☐ other: \_\_\_\_\_

#### PROPERTY INFORMATION

APN: 107-054-036

Date: 2/10/2021

Property Owner's Name: (print) Evan Kouchalakos

Property Owner's Signature: Evan Kouchalakos

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