

WELL DESTRUCTION APPLICATION & PERMIT

ENVIRONMENTAL MANAGEMENT DEPARTMENT (EMD) – ENVIRONMENTAL COMPLIANCE DIVISION 11080 WHITE ROCK ROAD • SUITE 200 • RANCHO CORDOVA, CA 95670 TELEPHONE (916) 875-8400 FAX: (916) 875-8513 EMAIL: wells@saccounty.net

WELL INSPECTION LINE: (916) 875-8524

FOR OF	FICE USE O	NLY										
EMD PE	RMIT NUMB	ER(S):			D	ATE APPLI	CATION	N APPROV	ED:			_
									(EXF	PIRES 1-YR FRO	M DATE OF APPROVAL)
WELL A	APPLICATI	ON										
Site Add	dress:			Neare	est Major Cro	ss Street(s)):	Well Loc	cation (At	tach Table f	for Multiple Addres	ses):
Property	y Owner Nan	ne:		Prope	erty Owner Ad	ddress:		.	Propert	y Owner Ph	one Number:	
Property	y Owner E-m	nail:				Parcel Nu	mber (A	Attach Tab	le for Mu	Itiple Parcel	s):	
Well Dri	lling Contrac	tor:		Mailin	g Address:				Phone	Number:		
									E-mail:			
Contrac	tor's CSLB L	icense No.:		Expira	ition Date:			Well/Boi	ring Ident	ification Nu	mber(s):	
		TIONS - A cop			ell Completion	on Report"	(DWR	Form 188) or equi	valent shal	I be submitted for	each
Well 1	<u>lype:</u>	Domestic/ /lunicipal ⁴⁹³⁰⁾	□ Irrigation/ Agricultura (4930)	al	□ Permaner Dewaterin	nt 🗆 (g F	Cathodio Protection	on	Monitori	oil/Vapor ng	☐ Geothermal H Exchange (494D)	Heat
Reaso		struction:									(10.12)	
Measu	rements:											
Depths	Total Borel	nole: ft	Annular:	ft	Production	Casing:	ft	Conducto	or Casing	: ft	To Water:	_ ft
Other	Borehole D	Diameter:	=		Open Botto						Pump Type:	
					110111		_ '`	110111				
		RUCTION SP										
□ Overd	Irill From:	ft BGS to	existing gra	de (BG	S = Below Gr	ound Surfa	ce) 🗆	Pressure	Grout: Fr	om	ft BGS to1	ft BGS
□ Blast I	Perforation	Detonation Cor	rd set from _	ft	BGS to	ft BGS	Explo	sive Boost	ers set fr	om	ft BGS to f	ft BGS
□ Boost	er placemen	t every:	ft		□ Mech	anical Perfo	oration:	cu	its/ft Fr	om	ft BGS to f	ft BGS
Addition	al informatio	n (i.e Method	used to ID ca	asing de	epth, Obstruc	tions, etc.):				_		
Sealing	Material:	□ Neat Ceme	ent	□ 8	Sand Cement	(10.3 min.)	□ Сс	oncrete (6 s	ack mix)	□ Bentor	nite Chips/Pellets	
Estimat	ted Void Vol	ume:										
	CANT INFO											
California original fe knowledg is comple	a Department ee amount will ge and that the ete and correct	of Water Resourd I be billed to the a signature below,	ces Well Stand applicant - As whether origin at it is my resp	ards, and authorized al, electronsibility	d the conditioned by SCC 6.9 conic, or photoconto notify the w	is of this pen 9.180. I certi copied, is aut rell owner of	mit. I ur fy that th horized a their res	nderstand the ne information and valid. Ea ponsibility to	at permitti on given ir ach page o o provide E	ing and inspe in this permit in of this documed EMD with prop	pter 6.28 (Well Ordina ection time in excess is correct to the best ent has been reviewe perty access for a fina	of the of my ed and
	nt Name:		equilion in all	goin io	Applicant		JII DI	J.1411 01 1116		o un	Date:	
Applicar	nt's Compan	y Name and Ma	ailing Address	3:	Applicant's	Office and (Cell Pho	one Numb	ers:	Applicant's I	_ Email Address:	
Applicar	nt is the:	□ Agent (Re	quires Auth	orizatio	on Form)		□ Prop	erty Owne	r	□ We	ell Contractor	
IMPORT	ANT: GIVE	AT LEAST 24-H	OUR NOTICE	TO TH	E EMD WELI	L INSPECTI	ON LIN	E WHEN S	CHEDUL	ING YOUR I	INSPECTION.	

WELL SITE PLAN - TO BE COMPLETED BY APPLICANT MINIMUM REQUIREMENTS **EXAMPLE** 1. North arrow, parcel dimensions, and scale (1-inch = feet) 2. Minimum of two measurements (with right angles) to the proposed well in feet (must be able to locate well using the site seepage pits 3. Location of site features including major buildings, landscaped areas, tank fields, existing wells, septic systems, Street easements, cross streets, etc. 4. Setback distances in feet to all existing wells, septic systems School 300' septic tank (including all adjacent parcels w/in 150 feet of proposed 165' well site), and other potential pollution sources. New 5. For some remote sites, include appropriate landmarks so that inspector can locate project site (e.g. access and driveway 60' approach, mile post markers, equipment staging location). N existing structure 6. **NOTE:** Incomplete site plans will delay permit processing. Well Site Address: Well Permit Number: Mayberry Avenue 1 square length = 20 feet

GENERAL WELL DESTRUCTION PERMIT REQUIREMENTS (SEE SACRAMENTO COUNTY CODE (SCC) CHAPTER 6.28 FOR DETAILED LOCAL WELL REQUIREMENTS) Permittee must perform a preliminary well assessment, determining: condition, details of construction, and presence of obstructions. Must include well's total depth, water level, well casing depth and condition [SCC 6.28.040(B)(4)(a)(1)]. All obstructions, debris, pollutants, or contaminants must be removed [SCC 6.28.040(B)(4)(a)(2)]. 2 SUPPLY WELL DESTRUCTION METHODS Overdrilling of the well to remove all well casing, filter pack, and annular seal. Fill the new borehole completely with sealing material. Mechanical perforation or blast perforation of the well casing; well is completely filled with sealing material under pressure. Blast perforation is required for wells with conductor casings [SCC 6.28.040(B)(4)(a)(6)]. For mechanical perforation, the minimum number of cuts per foot is (casing diameter - # cuts per foot): <8" - 4 cuts 8" - 12" - 6 cuts 12" to 16" - 8 cuts >16" - 12 cuts [Sacramento County Policy] Upper five feet must be excavated with a hole at least one foot in diameter larger than the well; well casing removed leaving six inches above bottom of excavation; sealing material spills over into excavation forming a cap; and remaining borehole filled with compacted native soil [SCC 3 6.28.040(B)(4)(a)(4)]. MONITORING WELL DESTRUCTION METHODS Pressure grouting of the well and other voids within the well; may require casing perforation. Well is completely filled with sealing material under pressure. Only allowed when the well was constructed and maintained per SCC and DWR standards. Overdrilling of the well to remove all well casing, filter pack, and annular seal. New borehole completely filled with sealing material. For urban areas, upper five feet must be filled with native soil or other suitable material [SCC 6.28.050C(2)(e){2}]. **EXPLORATORY BORING DESTRUCTION METHODS** Sealing material must completely fill the boring. For urban areas, upper five feet to be filled with native soil or other suitable material [SCC 5 6.28.050C(2)(e){2)] An EMD inspection is required for sealing material placement. Contact (916) 875-8524 to request an inspection; a minimum of 24-hours' notice is required [SCC 6.28.90]. 6 EMD APPROVED ANNULAR SEALING MATERIALS Neat cement will be mixed at a ratio of 1 ninety-four (94) pound sack of Portland cement to 5 to 6 gallons of clean water. Additional water may be required where special additives, such as bentonite, accelerators, or retardants are used. Sand cement will be mixed at a ratio of not more than one hundred eighty-eight (188) pounds of sand to one ninety-four (94) pound sack of Portland cement (2 parts sand to 1 part cement, by weight) and about 7 gallons of clean water. This is equivalent to a "10.3 sack mix." Less water shall be used if less sand than 2 parts sand per 1 part cement by weight is used. Additional water may be required when special additives, such as bentonite, accelerants, or retardants are used. Concrete will consist of Portland cement and aggregate mixed at a ratio of at least 6 ninety-four (94) pound sacks of Portland cement per cubic yard of aggregate. The size of the aggregate must be less than 1/5th the radial thickness of the annular seal. Bentonite clav may only be used with prior EMD approval. Bentonite shall be commercially prepared, powdered, granular, pelletized or chipped sodium montmorillonite clay. The size of pellets or chips must be less than 1/5th the radial thickness of the annular space. Bentonite slurries are 7 not approved [SCC 6.28.040(A)(2)(d)]. EMD staff will reject any sealing materials during inspection that do not meet standard. Permittee must verify volume of sealing material used during well destruction is at least equal to the volume of the empty hole [Sacramento 8 County Policy]. This permit may be revoked if the well is not in compliance with regulatory standards. Permittee and well owner agree to construct, operate, and maintain the well according to all applicable requirements listed in the Sacramento County Code and the California State Department of Water q Resources (DWR) Well Standards [SCC 6.28.120(C)]. This permit is only valid for approved well-related work listed on the application. Well construction methods (e.g. drilling methods, annular sealing material, well depth, etc.) authorized under this permit may not be changed except by written approval of an authorized EMD representative and only if EMD believes that such a change will result in equal or superior compliance with the County and DWR Well Standards (e.g. if the EMD 10 representative finds that site conditions warrant such a change) [SCC 6.28.120(C)]. This permit is only valid for the Assessor's Parcel Number listed on the application [SCC 6.28.120(B)(2)]. 11 12 The permittee will notify EMD within 5 days of well work completion [SCC 6.28.090(C)]. 13 The applicant shall submit a Well Completion Report (WCR) to EMD within 60 days of work completion [SCC 6.28.110(A)]. 14 Permittee shall maintain a copy of the permit at the work site during all stages of permitted activities [6.28.030(E)(5)].

WELL DESTRUCTION PERM	IT FORM - FOR OFF	FICE USE ONLY		
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PERMIT NUMBER(S): ACCOUNTING				
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PERMIT NUMBER(S): ACCOUNTING Date Received:		Total Fees:		
PERMIT NUMBER(S): ACCOUNTING Date Received:		Total Fees:		
PERMIT NUMBER(S): ACCOUNTING Date Received: Account Number: APPLICATION APPROVAL:		Total Fees:	Comments:	
PERMIT NUMBER(S): ACCOUNTING Date Received: Account Number: APPLICATION APPROVAL: NITIAL SITE INSPECTION:	Date:	Total Fees: Invoice Number: By:	Comments:	
PERMIT IUMBER(S): ACCOUNTING Date Received: ACCOUNT Number: APPLICATION APPROVAL: NITIAL SITE INSPECTION:	Date:	Total Fees: Invoice Number: By: By: By:	Comments:	
PERMIT IUMBER(S): CCOUNTING Date Received: CCOUNT Number: CCOUNT Number: CPPLICATION APPROVAL: NITIAL SITE INSPECTION:	Date: Date:	Total Fees: Invoice Number: By: By: By:	Comments:Comments:	
PERMIT IUMBER(S): ACCOUNTING Date Received: ACCOUNT Number: APPLICATION APPROVAL: NITIAL SITE INSPECTION:	Date: Date: Date: Total depth:	Total Fees: Invoice Number: By: By: By:	Comments: Comments: Comments: Seal depth:	
PERMIT NUMBER(S): ACCOUNTING Date Received: Account Number: APPLICATION APPROVAL: NITIAL SITE INSPECTION:	Date: Date: Date: Total depth: Depth to water: Casing depth:	Total Fees: Invoice Number: By: By: By:	Comments: Comments: Comments: Seal depth: Sealing material:	
PERMIT NUMBER(S): ACCOUNTING Date Received: Account Number: APPLICATION APPROVAL: NITIAL SITE INSPECTION:	Date: Date: Date: Total depth: Depth to water: Casing depth: Comments:	Total Fees: Invoice Number: By: By: By:	Comments: Comments: Comments: Seal depth: Sealing material:	
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PERMIT NUMBER(S): ACCOUNTING Date Received: Account Number: APPLICATION APPROVAL: NITIAL SITE INSPECTION: DESTRUCTION INSPECTION	Date: Date: Date: Total depth: Depth to water: Casing depth: Comments:	Total Fees: Invoice Number: By: By:	Comments: Comments: Comments: Seal depth: Sealing material: Conductor casing:	
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PERMIT NUMBER(S):	Date: Date: Date: Total depth: Depth to water: Casing depth: Comments: GPS Coordinates:	Total Fees: Invoice Number: By: By:	Comments: Comments: Comments: Seal depth: Sealing material: Conductor casing: W: -121.	
WELL DESTRUCTION PERMIPERMIT NUMBER(S):	Date: Date: Date: Total depth: Depth to water: Casing depth: Comments: GPS Coordinates:	Total Fees: Invoice Number: By: By:	Comments: Comments: Comments: Seal depth: Sealing material: Conductor casing: W: -121.	
PERMIT NUMBER(S):	Date: Date: Date: Total depth: Depth to water: Casing depth: Comments: GPS Coordinates:	Total Fees: Invoice Number: By: By:	Comments: Comments: Comments: Seal depth: Sealing material: Conductor casing: W: -121.	

SPECIAL PERMIT CONDITIONS

Yes

No

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