

Lat. _____
 Long. _____
 T. ____ R. ____ Sec. ____
 ¼ Sec. _____
 Quad. _____
 A.P.N. _____

**CITY OF OAKDALE
 WATER DEPARTMENT
 455 SOUTH FIFTH AVENUE
 OAKDALE, CA 95361
 TEL: (209) 847-4245
 FAX: (209) 847-8903**

Permit No. _____
 Date Issued: _____

APPLICATION FOR WELL DESTRUCTION

THIS PERMIT EXPIRES 1 YEAR FROM DATE ISSUED

Applications hereby made to the City of Oakdale Water Department, for a permit to destroy a water well, the work herein described. PLEASE NOTIFY THIS DEPARTMENT (USING PERMIT # AND D.W.R. WELL DRILLERS REPORT) WHEN WELL WORK IS COMPLETED.

JOB ADDRESS / LOCATION: _____ City of Oakdale, CA 95361

Distance & Direction from Nearest Cross Streets: _____

Owner's Name: _____ Phone: _____

Address: _____ City / State _____

Contractor's Name: _____ License #: _____ Phone: _____

TYPE OF WORK: (Check one) OTHER WELL DESTRUCTION

DISTANCE TO NEAREST: SEPTIC TANK _____ SEWER LINES _____ PIT PRIVY _____
 OTHER WELL _____ SEWAGE DISPOSAL FIELD _____
 SEEPAGE PIT _____ DRY WELL _____ OTHER _____
 ANIMAL ENCLOSURE _____

INTENDED USE:

- Industrial
- Domestic / Private
- Domestic / Public
- Irrigation
- Cathodic Protection
- Other _____

TYPE OF WELL:

- Cable Tool
- Drilled
- Gravel Pack
- Rotary
- Other _____

DESTRUCTION SPECIFICATIONS:

Dia. Of Well Excavation _____
 Dia. Of Well Casing _____
 Gauge of Casing _____
 Depth Conductor Casing _____
 Depth of Grout Seal _____
 Type of Grout _____ # Bags _____
 Grout Manufacturer _____
 Grout Name _____

Well Destruction: Describe method if different than minimum State Standards: _____

Existing Well Present? YES NO Status: Active To Be Destroyed Inactive

CITY OF OAKDALE USE ONLY

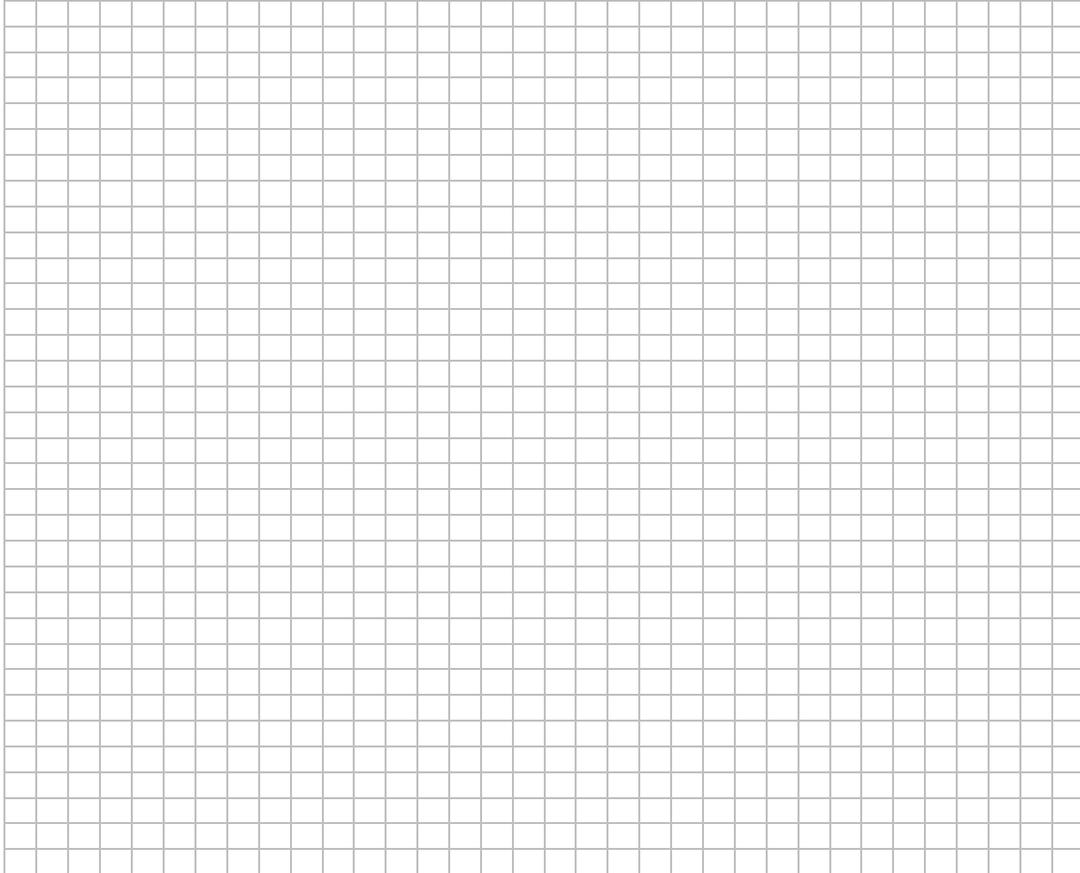
Permit Issued by: _____ Date: _____
 Permit Denied by: _____ Date: _____ (See Attached)
 Grout Seal Inspected By: _____ Date: _____
 Final Inspection by: _____ Date: _____

ORIGINAL – Office COPY – Contractor COPY – Applicant

SHOW THE FOLLOWING ON THE SQUARE GRID BELOW:

1. Name of street and distance from nearest cross roads to well site.
2. Outline of the property easements.
3. Outlines and locations of all existing and proposed structures, including covered areas such as patios, driveways, and walks.
4. Location of house sewer outlet, public sewer, sewage disposal system, or proposed sewage disposal system, proposed expansion of sewage disposal system, industrial waste pond, or any other possible source of contamination.
5. Location of other wells within radius of 300 feet on the property or adjoining property.
6. Location of sewage disposal system on adjoining property or within a radius of 100' (private well) 150 ft. (public well).

NORTH



Written description of well location (if not visible from road): _____

I HEREBY CERTIFY THAT I HAVE PREPARED THIS APPLICATION AND THAT THE WORK WILL BE DONE IN ACCORDANCE WITH THE PROVISIONS OF THE LAWS OF THE STATE OF CALIFORNIA, THE ORDINANCES OF THE CITY OF OAKDALE, AND THE OAKDALE STANDARD SPECIFICATIONS. THE CITY OF OAKDALE WATER DEPARTMENT WILL BE CONTACTED FOR INSPECTION OF ANNULAR SEAL INSTALLATION, AND AFTER WELL WORK HAS BEEN COMPLETED.

1. All existing wells within a 300' radius of the well to be destroyed on the existing property or adjoining property must be located and so indicated on drawing.
2. Show any Septic tanks, on existing property.

SIGNED: _____ DATE: _____
(OWNER OR AUTHORIZED REPRESENTATIVE)