**ALAMEDA COUNTY PUBLIC WORKS AGENCY**



**Well Standards Program, Attn: James Yoo**

**399 Elmhurst Street, Hayward, CA 94544-1307**

**Phone: (510) 670-6633 |**

**General Info:** [**www.acgov.org**](http://www.acgov.org) **or email at** [**wells@acpwa.org**](mailto:wells@acpwa.org)

# FOR GENERAL DRILLING PERMIT INFO.: [www.acgov.org/pwa/wells](http://www.acgov.org/pwa/wells)

# WELL COMPLETION REPORT REQUEST—OWNER

Use this form to request a copy of the Well Completion Report or records on file with the Alameda County Public Works Agency, Water Resources Section, for a well you own. Describe the well below. California Water Code Section 13752 permits release of Well Completion Reports from DWR files on written request by the well owner. DWR requires the township, range, and section where the well is located to start a search. Attach a map or a sketch with north indicated and as much identifying information listed below as possible. Use additional paper if necessary.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Location of well (city or county) | | | | | | | | | | | |  | | | | | | | | | | Year drilled | | | |  | | |
| Street address | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |
| Distances and directions from cross streets or other landmarks | | | | | | | | | | | | | | | | | |  | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Township | | | | |  | | | | , Range | |  | | | , Section | |  | | | | | , Quadrant | | | |  | | , Use |  |
| Owner at time of drilling | | | | | | | | | |  | | | | | | | | Driller | | | | |  | | | | | |
| Depth of well | | | | | | |  | | | | | | Diameter and type of casing | | | | | | | | | |  | | | | | |
| Other identifying information, such as assessor’s parcel number (on tax statement), subdivision or tract, lot number, | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| well number, well completion report number, driller, date completed, (other) | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| I certify that I am the present owner of the well described above. | | | | | | | | | | | | | | |  | | **Complete this part only if you wish a copy sent to someone other than yourself.** Please send a copy of this Well Completion Report to: | | | | | | | | | | | |
|  | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | |
| Name (please print) | | | | | | | | | | | | | | |  | | Name/Company | | | | | | | | | | | |
|  | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | |
| Address | | | | | | | | | | | | | | |  | | Address | | | | | | | | | | | |
|  | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | |
| City, State, Zip Code | | | | | | | | | | | | | | |  | | City, State, Zip Code | | | | | | | | | | | |
| Telephone | | | | | | ( ) | | | | | | | | |  | | Telephone | | | | | | ( ) | | | | | |
| Fax | | ( ) | | | | | | | | | | | | |  | | Fax | | ( ) | | | | | | | | | |
| Date | | |  | | | | | | | | | | | |  | | Date | | |  | | | | | | | | |
| E-mail | | | |  | | | | | | | | | | |  | | E-mail | | | | |  | | | | | | |
|  | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | |
| Signature | | | | | | | | | | | | | | |  | | Owner’s Signature Authorizing Release | | | | | | | | | | | |