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## APPLICATION FOR WELL PERMIT

THIS SECTION TO BE COMPLETED BY APPLICANT • HEALTH PERMITS ARE NOT TRANSFERABLE			
1 – PROPERTY INFORMATION			
Property Owner			Phone Number
Site Address	City	State	Zip
Assessor's Parcel Number		Email	
Township	N/S Tier	E/W Range	Section
Well Head	Latitude (decimal)		
	Longitude (decimal)		
Property Owner's Mailing Address		City	State
			Zip
2 – CONSULTANT INFORMATION			
Name of Consultant		Email	Phone Number
Address		City	State
			Zip
3 – REGISTERED WELL DRILLER INFORMATION			
Name of Driller			Phone Number
Email			C-57 License Number
Return well permit to <input type="checkbox"/> Well Driller <input type="checkbox"/> Consultant <input type="checkbox"/> Property Owner			Return by <input type="checkbox"/> Mail <input type="checkbox"/> Email
4 – TYPE OF WORK			
<input type="checkbox"/> New		<input type="checkbox"/> Reconstruction	<input type="checkbox"/> Destruction
Date of Work	Start Date	Completion Date	
5 – WELL TYPE			
<input type="checkbox"/> Agriculture	<input type="checkbox"/> Geothermal	<input type="checkbox"/> Industrial	
<input type="checkbox"/> Cathodic	<input type="checkbox"/> Horizontal	<input type="checkbox"/> Monitoring/Observation	
<input type="checkbox"/> Community/PWS/City – <b>Specify Use Below</b>	<input type="checkbox"/> Residential – cannot be used as a community well	<input type="checkbox"/> Test	
Use:		<input type="checkbox"/> Other	
6 – ANNULAR SEAL			
Seal Depth (ft.)			
<input type="checkbox"/> Driven Conductor Diameter (in.)		<input type="checkbox"/> Wall (gauge) (in.)	
<input type="checkbox"/> Sealing Material		<input type="checkbox"/> Thickness (in.)	
Sealing material shall be placed in one continuous pour. Annular seal thickness must be at least 3 inches for public water supply wells.			
ITEMS 7 THROUGH 10 TO BE ESTIMATED FOR NEW WELLS, EXACT FOR ALL OTHER WELLS			
7 – DIMENSIONS			
Proposed Depth of Well (ft.)	Existing Depth of Well (ft.)	Diameter of Bore (in.)	
8 – CASING INSTALLED			
<input type="checkbox"/> Steel		<input type="checkbox"/> Plastic	<input type="checkbox"/> No Casing
<input type="checkbox"/> Standard Casing		<input type="checkbox"/> Other	
<b>From (ft.)</b>	<b>To (ft.)</b>	<b>Diameter (in.)</b>	<b>Wall (Gauge)</b>
Gravel Pack <input type="checkbox"/> Yes <input type="checkbox"/> No	From (ft.)	To (ft.)	
Specify Other Backfill Material	From (ft.)	To (ft.)	

9 – PERFORATIONS (list all if applicable)			
From (ft.)	To (ft.)	Pumping Rate (gpm)	
10 – SEALED ZONES (list all if applicable)			
From (ft.)	To (ft.)		
11 – PLOT PLAN			
<p>a) In perspective to the well site, sketch and label the following items <b>on a separate paper</b>: well lot property lines, other wells (include abandoned wells), sewage disposal systems (sewers, septic tanks, leaching fields, seepage pits, cesspools), lakes and ponds, watercourses and animals or fowl kept.</p> <p>b) Indicate the distance, in <b>feet</b>, of any of the above which are within 500 ft. of the well site. The plot plan needs to be drawn to scale (½ inch = 100 feet). Show the approximate drainage pattern of the property and show access roads to the well site within 500 feet.</p> <p>c) <input type="checkbox"/> None of the above is within 500 feet.</p> <p>d) Solid or Liquid Disposal Site within Two Miles                      <input type="checkbox"/> Yes                      <input type="checkbox"/> No                      Location</p>			
12 – METHOD OF CONSTRUCTION OR DESTRUCTION			
Provide the method of construction/destruction in the space below or as an attachment if more space is needed. The method shall be in accordance with the standards recommended in the California Department of Water Resources Bulletin No. 74-81 and 74-90. Title 22 standards shall also be followed for public water supply wells.			
13 – AGREEMENT AND SIGNATURE			
I have read this application and agree to comply with all laws regulating the type of work being performed.			
Property Owner's Signature <b>X</b>			Date
Print Property Owner's Name			
C-57 Contractor's Signature <b>X</b>			Date
Print Contractor's Name			
For Office Use Only    DISPOSITION OF PERMIT    For Office Use Only    DISPOSITION OF PERMIT			
<p>Submit to the District, within thirty (30) days after completion of work, a copy of:</p> <p><input type="checkbox"/> Water Well Drillers Report</p> <p><input type="checkbox"/> Geologist Log (if available)</p> <p><input type="checkbox"/> Actual Depth Drilled and Production Capability</p> <p><input type="checkbox"/> CA Regional Water Quality Control Board Form 200</p> <p style="font-size: 1.2em; margin-top: 20px;"><b>The District may install a meter on your well, at no cost to you in order to monitor production</b></p>			
Comments			
For Office Use Only    For Office Use Only    For Office Use Only    For Office Use Only    For Office Use Only			
Fee:	FA Number:	Record ID:	PE Number:
Late Fee: <input type="checkbox"/> Y <input type="checkbox"/> N	Designated Employee:	Received By:	Date:
Check One: <input type="checkbox"/> New <input type="checkbox"/> Transfer <input type="checkbox"/> Reactivate		Changes (please specify):	