

SANTA CLARA COUNTY DEPARTMENT of ENVIRONMENTAL HEALTH
2220 Moorpark Avenue, San Jose, CA 95128
(408) 299-6060

**APPLICATION FOR A CLEARANCE FOR
AN INDIVIDUAL PRIVATE WATER SYSTEM-ONE SERVICE CONNECTION**

Application Date 8-24-07 Clearance # _____

Owners Name (please print) Leavesly Road Partners

Mailing Address 6806 Fall Brook Ct. #1 Phone # (916)439-3180
Granite Bay, CA 94801

Well Site Location Leavesly Road-Parcel 2 AP# 893-34-001
address assessor's parcel #

Applicant's Name Leavesly Road Partners Phone # (916)439-4859

Application Fee \$584.00

Note:

1. All application fees are nonrefundable.
2. A denial may be reversed on appeal.

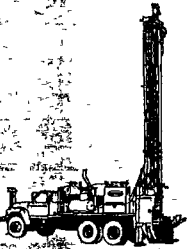
The undersigned property owner (s) hereby authorizes the filing of this application and on site review by authorized staff. I certify under penalty of perjury that the foregoing is true and correct.

Signature of Property Owner (s)

X _____

Date

9/5/07



GUARDINO WELL DRILLING, INC.

4825 CROY ROAD, MORGAN HILL, CA 95037

PHONE (408) 779-5904 FAX (408) 778-1692

www.guardinowell.com

August 21, 2007

TO: *MH Engineering*

RE: Parcel 2 Well Information

Enclosed, herewith, please find the following:

- ◆ Well Test and Pump Yield Report
- ◆ General Inorganic analysis
- ◆ Microbiological Analysis
- ◆ Water Well Completion Report
- ◆ Water well construction permit

Please keep one copy for your records. The County will require one copy as part of your building permit/site approval application. **Suzanne Muzzio can answer water Quality Questions and/or Concerns at the Santa Clara County Dept. of Environmental Health (408) 918-3411.** We see no water quality or quantity concerns. SCCDEH will accept the aforementioned test for a period of two years from test date.

(2) Copies of the well documentation for this property has been mailed to Leavesley Road Partners, LLC. We have received payment in full and we have no mechanic's liens placed on the property.

Cordially,



Augie Guardino
General Manager

Encl.

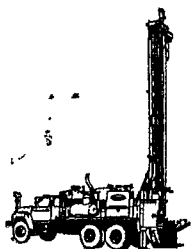


GUARDINO WELL DRILLING, INC.

4825 CROY ROAD, MORGAN HILL, CA 95037

PHONE (408) 779-5904 FAX (408) 778-1692

www.guardinowell.com



WELL TEST AND PUMP YIELD REPORT

CUSTOMER: Leavesley Road Partners, LLC.
LOCATION: Yarak Ct. (Leavesley Rd.)
Gilroy, CA 95020

TEST DATE: 8/6/07
APN: 898-34-002
WELL NO: 526293, #1

Well depth: 225 feet, casing size: 5".

Health department notified prior to testing: (x) yes () no.

Water sample collected for quality testing: (x) yes – attached () no.

COPY

IMPORTANT INFORMATION:

Testing began at: 1:00 PM on 8/6/07, with water at: 74 feet.
Duration of continuous pumping hours: Three hours.
Total yield: 5,580 gallons.
Draw down during test: 1 feet.
Water level $\frac{1}{2}$ hour after completion of test: 74 feet.
Average flow rate during test: 31 Gallons Per Minute.

ADDITIONAL INFORMATION:

Method of test: - submersible pump.
Pump was provided by: - *customer.*
Power was provided by: - *customer.*
Pump horsepower: - 1.5 hp, gallons per minute rating: 27+ GPM.
Pump setting: - 160°.
Misc.: - a sonic sounder was used to indicate water level.

Well was chlorinated prior to testing. I certify that our personnel performed the aforementioned pump test and the information provided here is correct to the best of my knowledge. This test is valid as of the date of the test. Conditions of water wells are subject to changes that cannot be predicted. This test is in no way a warranty, either implied or expressed as to future production.

Signed:  Date: 8/10/07
Angie Guardino
General Manager, *Guardino Well Drilling, Inc.*



2337 Technology Pkwy., Suite K
Hollister, CA 95023

BOLSA ANALYTICAL
State Certified Laboratory #1326

Tel: (831) 637-4590
Fax: (831) 634-1854

GENERAL INORGANIC ANALYSIS

Project No.: 295 Sample ID No. 72265
Date of Report: 08/20/07 Signature Lab
Laboratory Name: Bolsa Analytical Director:
Name of Sampler: Guardino Well Drilling, Inc.
Date/Time Sample Collected: 8/2/2007 13:00
Date/Time Sample Received: 8/2/2007 13:55
Date Analyses Completed: 8/17/2007

COPY

Tomas Moreno, M.S.

Page 1 of 1

SYSTEM NAME: Leavesley Road Partners, LLC
SAMPLE SOURCE: Yarak Ct. - Parcel 2
APN # 898-34-002
Well # 526293

ANALYTE	ANALYSES RESULTS	REPORTING UNITS	DLR	MCL
Nitrate (NO3)	37	mg/L	1	45
Fluoride (F)	0.4	mg/L	0.1	1.4 - 2.4
Aluminum (Al)	< 50	ug/L	50	1000
Arsenic (As)	< 2	ug/L	2	50
Barium (Ba)	< 100	ug/L	100	1000
Cadmium (Cd)	< 1	ug/L	1	5
Chromium (Total Cr)	< 10	ug/L	10	50
Iron (Fe)	< 100	ug/L +	100	300
Lead (Pb)	< 5	ug/L	5	50
Manganese (Mn)	< 20	ug/L +	20	50
Mercury (Hg)	< 1	ug/L	1	2
Selenium (Se)	< 5	ug/L	5	50
Silver (Ag)	< 10	ug/L +	10	100

DLR, Detection limit for reporting purposes

ND, None detected at or above DLR

MCL, Maximum contaminant levels

+ Indicates Secondary Drinking Water Standards

<= Less than

mg/L = milligrams per liter

ug/L = micrograms per liter

2337 Technology Pkwy., Suite K
Hollister, CA 95023

BOLSA ANALYTICAL
State Certified Laboratory #1326

Tel: (831) 637-4590
Fax: (831) 634-1854

Guardino Well Drilling, Inc.
4825 Croy Road
Morgan Hill, CA 95037

COPY

PROJECT Nº: 295
DATE OF REPORT: 08/03/07
COLLECTED BY: Guardino Well Drilling, Inc.

ANALYSIS REPORT

LABORATORY No.	DATE SAMPLED	SAMPLE SITE	Total Coliform	<u>E. coli</u>
72265	8/2/07 13:00	Leavesley Road Partners, LLC Yarak Ct. - Parcel 2 APN # 898-34-002 Well # 526293	Absent	Absent

PRESENT = UNSAFE, ABSENT = SAFE

Type: Special

Method: Colliert, 100 ml

Tomas Moreno, M.S.
Lab. Director

WELL CONSTRUCTION APPLICATION

5750 Almaden Expressway, San Jose, CA 95118 (408) 265-2600

FC 158 (04-22-92) (DP 4-901)

TO BE COMPLETED BY DISTRICT

District Permit No: <u>96W00093</u>	Date Issued: <u>9-11-96</u>	Well Registration No:
Geologic Setting: <u>4</u>	Expiration Date: <u>3-11-97</u>	Driller's Log No: <u>526723</u>

TO BE COMPLETED BY OWNER AND DRILLER

Property Owner: <u>Rich Vonalvensleben</u>	Well Owner (if different): <u>Rich Vonalvensleben</u>	Drilling Co: <u>Guardino Well Drilling, Inc.</u>
Address: <u>1050 Stonegate Ct.</u>	Address of Well Site: <u>Old Leavlesley Rd.</u>	Driller's Contractors License Number (C-57 Req'd): <u>C-57-664960</u>
City, State, Zip: <u>Morgan Hill, CA 95037</u>	City, State, Zip: <u>Gilroy, CA 95020</u>	Address: <u>8500 Gilroy Road</u>
Telephone No: <u>(408) 779-9344</u>	Telephone No:	City, State, Zip: <u>Morgan Hill, CA 95037</u>
Assessor's Parcel No. of Well site: Book <u>898</u> Page <u>34</u> Parcel <u>002</u>	Owner's/Consultant's Well No: <u>1</u>	Telephone No: <u>(408) 779-5904</u>

COPY

Estimated depth of completed well: Less than 50 ft. 50 to 300 ft. Over 300 ft.

Purpose of Well: Domestic Municipal/Industrial Agricultural *Monitoring Cathodic Protection

*Monitoring wells are those constructed for the purpose of obtaining repetitive water level measurements and/or repetitive air samples for analysis. This includes wells constructed for general exploration and investigation purposes as well as those to be constructed in conformance with the Hazardous Materials Storage Permit Ordinance for site-specific groundwater monitoring of existing underground hazardous materials storage tanks.

THIS SECTION TO BE COMPLETED FOR ALL MONITORING WELLS OR EXTRACTION/RECOVERY WELLS

Purpose of Monitoring Well: To comply with City or County Hazardous Materials Storage Permit Ordinance Exploration studies Other (specify): _____ Extraction/Recovery

NAME OF BUSINESS AT WELL SITE: _____

If proposed well is to meet compliance with a Hazardous Materials Storage Permit Ordinance has the City or County been contacted? Yes No

Consultant's Name (Company): _____

Address: _____

City, State, Zip: _____

Telephone No.: _____

Type of monitoring device: Groundwater Vadose

Type of extraction device: Groundwater Vadose

Monitoring well use: Depth Quality Chloride

Vadose device installation: Vapor Interface Suction Lysimeter

Signature of Responsible Professional (No substitution of signature will be accepted)

Registration No. Civil Engineer OR Certificate No. Engineering Geologist

TOPOGRAPHIC FEATURES

Well is to be constructed: In a public sidewalk In a public road On public property On private property On SCVWD property

Within 50 ft of the top of a creek bank: Yes No

Within 50 ft. of a sanitary sewer: Yes No

Within 100 ft. of a pit privy, septic tank, leachfield: Yes No

Other wells exist on this property: Yes No

Status: Active Inactive Abandoned

CERTIFICATION BY WELL OWNER/AGENT AND DRILLER/AGENT:

I certify that the information given above is correct to the best of my knowledge. I certify that the well will be constructed in compliance with the conditions of this permit, the Santa Clara Valley Water District's Ordinance 90-1 and, if applicable, the Hazardous Materials Storage Permit Ordinance of the County or City, as appropriate. It is my responsibility as the well owner to notify this District of any changes in the purpose of this well from that which is indicated on this application form.

[Signature] 9/6/96
Signature of Well Owner/Agent Date

[Signature] 9/6/96
Signature of Driller/Agent Date

MONITORING WELL PLAN APPROVAL

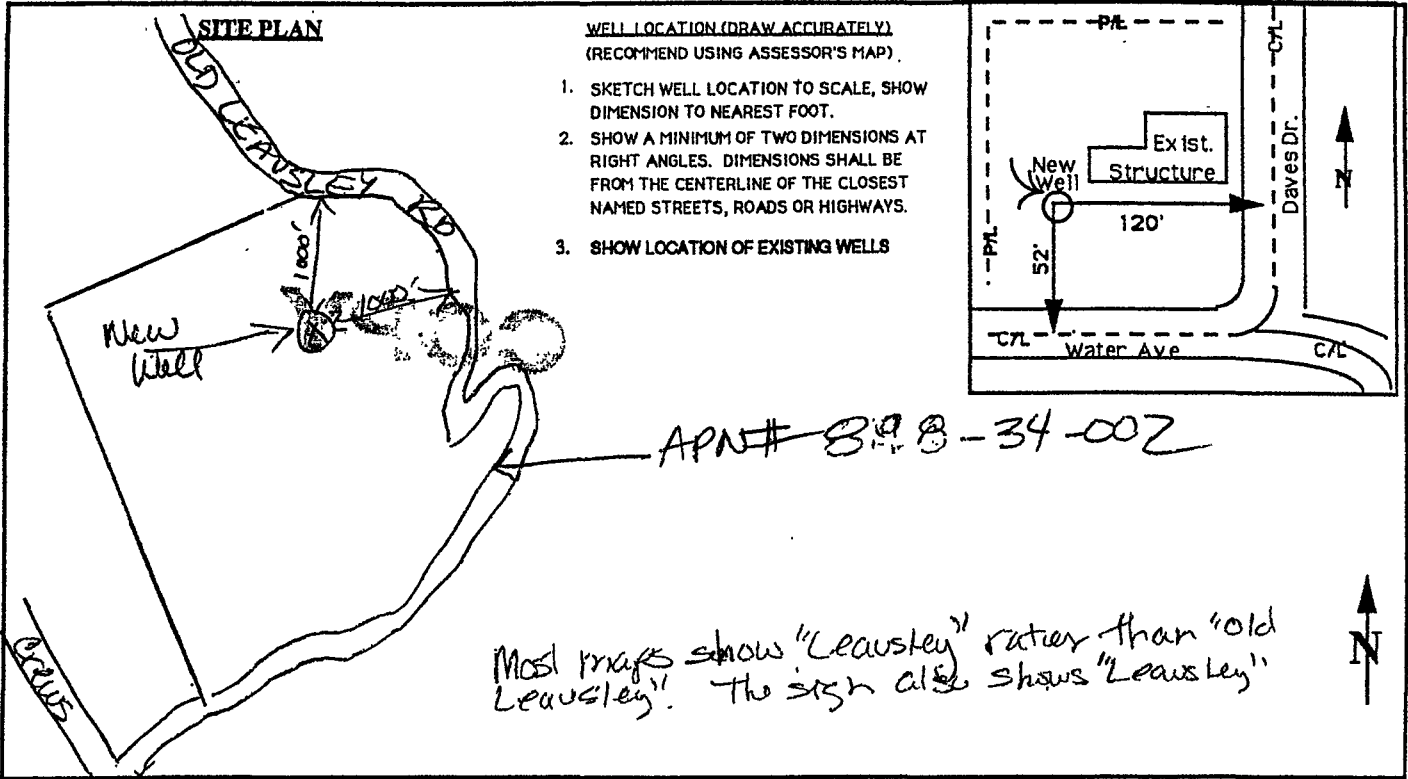
City/County: _____

Approved by: _____

Date: _____

DISTRICT WELL PERMIT NO.: 16W00093 WELL CONSTRUCTION APPLICATION

Based on information on the application and attachment(s) hereto (if any) and subject to approval noted below, permission is hereby granted to construct (drill) the described well. Permission to start may be withheld until a field check verifies all statements made on application by Permittee and is also subject to the "General" and "Special" Conditions stated below.



GENERAL CONDITIONS

- A. S.C.V.W.D. Well Inspection Department (Telephone 408-927-0710, ext. 660) must be notified a minimum of one working day prior to starting work. Construction under this Permit is subject to any instructions by District representative relative to the "Standards for the Construction of Wells in Santa Clara County". A District Inspector must be on site to witness all annular sanitary seals.
- B. Permit may be voided before work begins if field check reveals any misrepresentation under "well location" or "Topographic Features" on application.
- C. This Permit is valid only for the purpose specified herein. No change in construction procedure as prescribed in District Standards and in Special Conditions below will be allowed except upon written permission of the District.
- D. Permittee shall assume entire responsibility for all activities and uses under this Permit and shall indemnify, defend and save the District, its officers, agents and employees free and harmless from any and all expense, cost or liability in connection with or resulting from the exercise of this Permit including, but not limited to, property damage, personal injury and wrongful death.
- E. Compliance with "CAL/OSHA", California Labor Code Section 6300 (and following) is required.
- F. Water quality and production from all wells to be used for public water supply must be approved by the County Environmental Health Services.
- G. Permit will be automatically canceled if not exercised or if extension is not requested by Permittee within 180 calendar days.
- H. Driller is to complete State DWR Form 188 and mail original to Santa Clara Valley Water District within 30 days of completion of well construction.
- I. For the construction of all types of wells, a Permittee must be a licensed C-57 water well drilling contractor.
- J. Dry holes shall be backfilled within one week of drilling. Backfilling shall be done in accordance with District Standards.
- K. Each well requires a separate Well Construction Application and Permit.
- L. Permittee shall seal all abandoned wells on the property.
- M. All drilling fluid and materials will be safely handled and properly disposed of in the appropriate method.
- N. Permittee shall have a current copy of their Workman's Compensation Insurance on file with the S.C.V.W.D.

SPECIAL CONDITIONS

SCVWD APPROVED: _____

DATE: 9-11-96

SCVWD SEP 18 9 16 PM '96