Lockheed Martin Corporation, Shared Services Energy, Environment, Safety and Health 2950 North Hollywood Way, Suite 125 Burbank, CA 91505 Telephone 818-847-0197 Facsimile 818-847-0256



May 23, 2006

Mr. Ju-tseng Liu
Unit Chief, Southern California Cleanup Operations
Site Mitigation Operations Branch
Department of Toxic Substances Control
5796 Corporate Avenue
Cypress, California 90630

Subject: Lockheed Beaumont Potrero Site Abandonment of Three (3) Former

Production Wells, Beaumont Site 1, Beaumont, California

Reference: a) Abandonment of Former Production Wells at Beaumont Site 1, Beaumont,

California; Letter Report Workplan dated August 11, 2003

b) Revised and Updated "No Effect" Activities for Environmental Remediation at Beaumont Site 1 (Potrero Creek Site) Formerly Owned by Lockheed Martin

Corporation dated, "No Effect" activities letter submitted to USFWS 19 May 2004

Dear Mr. Liu:

On behalf of Lockheed Martin Corporation (LMC), Tetra Tech, Inc. (Tetra Tech) has prepared this report to document the destruction of three former groundwater production wells located at Beaumont Site 1 (Site) (see Figure 1). These wells were located adjacent to a former motor washout facility (well W-l-1), the Betatron building (well W-l-2), and remnants of a former windmill (well W-l-5) (see Figure 2). Groundwater investigations indicate the presence of chlorinated hydrocarbon in groundwater at or nearby these wells. The purpose of the well destruction activities was to minimize the potential for cross-contamination between the water bearing zones and to complete work as agreed upon between LMC and Property Owner (State of California Department of Fish and Game, Wildlife Conservation Board) in the Purchase and Sales Agreement, dated December 22, 2003.

All well destruction work described in this report was done in accordance with the approved work plan (Approved Work Plan - Reference a). Tetra Tech and its subcontractor, J and H Drilling Co, Inc. (J and H Drilling), performed the well destruction activities on behalf of LMC. The areas where the well destruction was performed are sensitive habitat for the Stephens' Kangaroo Rat (SKR), a State and Federally listed threatened and endangered species. All work was done using mitigation and monitoring methods approved by the United States Fish and Wildlife Service (USFWS) and documented in the "No Effect" letter (Reference b) to USFWS.

Background Information

The three wells destroyed were former groundwater production wells located at Beaumont Site 1. Wells W-1-1 and W-1-2 were installed by LMC and well W-1-5 was a former agricultural supply well installed by the previous site owners prior to LMC's acquisition of the property. A review of available well records yielded no data concerning the three production wells. Visual observations and video logs of the wells performed in 1989 yielded the information provided in Table 1. The video logs also showed some sections of all three wells contained partial obstructions and degradation of the casing particularly the portion of the well casings above groundwater.

Table 1
Well Construction Data

Well ID	Well Material Type	Well Diameter (inches)	Total Depth (feet bgs)	Screened Interval (feet bgs)
W-1-1	Spiral Seamed Steel	14"	388	210-388
W-1-2	Steel	8"	247	93-247
W-1-5	Riveted Steel	12"	127	60-127

Based on historical hydrogeologic data and well construction of adjacent wells, individual wells may have been screened in one or more of the major geologic units beneath the Site including the Quaternary Alluvium, the Mount Eden Formation, or the basement granite. As reported in the work plan, groundwater elevations at W-1-1, W-1-2, and W-1-5 were 52 feet, 62 feet, and 120 feet below ground surface (bgs), respectively.

Biological Constraints

The presence of the endangered SKR in the areas immediately surrounding all three wells required implementation of the provisions for non-intrusive activities as provided for in the Approved Work Plan and mitigation measures as specified in the No-Effect Activities Letter (Reference b). The non-intrusive methods included leaving the well's monument and surface completion in place and sealing the well by grouting to ground surface without perforating the well casing. The condition of the well casings also precluded perforating the casings as well. These variances of the surface abandonment methodology were performed with the approval of the local regulatory agency (Riverside County Department of Environmental Health [DEH]).

A Section 10A permitted biologist evaluated each well location prior to any field activities to determine access concerns and required mitigation. The locations of wells W-1-1 and W-1-5 could be accessed with a small drill rig by using avoidance measures and load spreading mats. Well W-1-2 was located in an area of extremely high SKR density with soil characteristics such that foot pressure could cause disturbance to SKR burrows. Therefore, no vehicular access to this well was possible. An approved representative of a Section 10A permitted biologist supervised all potential disturbance activities and observed and directed the measures taken to limit the effects of the disturbance. Mitigation measures included flagging of SKR burrows for avoidance, the use of load spreading mats and plywood sheets, and prohibiting and/or limiting vehicle access in certain areas.

Well Destruction Permit Process

In planning for the destruction of the wells, the DEH was contacted in October 2003 to discuss abandonment methodology and to obtain well destruction permits. DEH personnel stated that the wells could be destroyed by grouting the well from the bottom up using a tremie pipe with a 10-sack sand slurry without perforating the casing. DEH also approved grouting the wells without the use of a tremie pipe using a concrete truck and pump parked on existing roads with a hose running to the well, if required due to biological constraints. The grout was to be pumped at a slow rate to prevent bridging in the lower casing. For both grouting methods, the amount of pumped concrete was to be compared against the calculated volume of the casing to ensure the entire well casing volume had been filled. Well permits for the destruction of the three wells were initially obtained in October 2003 and renewed in September 2005 for the destruction methods described above. DEH was consulted prior to the start of well destruction field activities and elected not to have an inspector present during the well destruction. Copies of the 2003 and 2005 permits are provided in Attachment 2.

Well Destruction Methodology

All three wells were destroyed by filling the well casings with a 10-sack grout to ground surface in accordance with the Approved Work Plan. The top of wells W-1-1 and W-1-5 were modified to allow

for placement of the grout with a tremie pipe and collection of the potentially contaminated displaced well water. The tremie pipe was lowered into these wells and was sealed using a sanitary seal. A hose was attached to a pipe fitting welded to the side of the well casing to capture any water or grout displaced as the well was filled with grout. All captured water and grout was contained in a portable tank for later disposal. Grout was pumped into wells W-1-1 and W-1-5 from the bottom up using a tremie pipe. Well W-1 was filled in two pumping events. The first pumping event filled W-1-1 to above the screened interval. The grout was allowed to settle and partially cure, and, three days later, the casing was filled to the surface with grout. The 6-inch submersible pump, wiring, and pump piping in well W-1-1 were removed and disposed of prior to well destruction. No displaced water was collected from Well W-1-5. As grout reached the surface during grouting of W-1-5, grout began seeping out of ground near the casing indicating the deteriorated and damaged condition of the well casing.

Well W-1-2 was destroyed by welding a pressure cap to the surface completion and filling the well with pressurized grout via piping from a concrete truck and pump parked in the nearby existing road. Well W-1-2 generated no displaced water because the pressure grouting method pushed the water out of the casing back into the formation.

As approved by the DEH, the wells were not perforated prior to grouting. Consultation with drilling contractors and a well perforation specialist indicated that perforation using a mills knife or by explosives had a high risk of causing well casing collapse in the deteriorated wells. Additionally, the explosive perforation process would have the potential to introduce explosives residue into the groundwater.

Monuments and surface completions were left in place to avoid SKR disturbance. The casing extension at W-1-1 and W-1-5 and the pressure cap at W-1-2 were cut off, and a steel cap was welded to the top of each casing. Well preparatory activities (welding casing extensions, installation of pressure cap, removal of pump in W-1-1, etc.) began on 9 September 2005 and well destruction was completed on 21 October 2005. In all cases the volume of grout placed in the wells exceeded the volume calculated for each well prior to destruction. Table 2 summarizes the destruction information for each well.

Table 2
Well Destruction Information

Well ID	Date Well Destruction	Date Well Destruction	Grout Quantity		Comments
	Began	Completed	Calculated Quantity to Fill Well	Actual Quantity Pumped	
W-1-1 (first pumping event)	10/18/05	10/18/05	8.83 cu. yd.	10 cu. yd.	Filled casing from TD (363' bgs) to 140' bgs. Approximately 1.17 cu. yd. of grout pushed into formation/ annular space for this filling.
W-1-1 (second pumping event)	10/21/05	10/21/05	5.42 cu. yd.	5.5 cu. yd	Approximately 0.08 cu. yd. of grout pushed into formation/annular space for this filling. Total of 1.25 cu. yd. of grout pushed into formation/ annular space.
W-1-2	10/19/05	10/19/05	3.2 cu. yd	4.0 cu. yd.	Approximately 0.8 cu. yd. of grout pushed into formation/annular space. Maximum surge pressure of 250 psi observed while pumping. Maintained pressure and pumping until 50 psi pressure could be maintained
W-1-5	10/20/05	10/20/05	3.2 cu. yd.	5.5 cu. yd.	Approximately 2.3 cu. yd. of grout pushed into formation/annular space.

Notes: TD - total depth cu. yd. - cubic yards bgs- below ground surface psi - pounds per square inch Mr. Ju-tseng Liu May 23, 2006 Page 4 of 4

California Department of Water Resources (DWR) well completion reports were completed by J and H Drilling following completion of the well destruction and are provided in Attachment 3. The DWR completion reports were also sent to DWR and Riverside County DEH directly following well destruction completion. Photographs of the well destruction process are provided in Attachment 4 to this report.

The destruction of the three former production wells at Beaumont Site 1 documented in this report were completed successfully in accordance with methods described in the approved work plan and additional requirements by DEH. All mitigation and monitoring measures for the protection of SKR were successfully implemented in completion of the work.

Should you have any questions or comments regarding this report or the well destruction procedures please contact me at (818) 847-0197 or Mr. Thomas Villeneuve of Tetra Tech at (909) 381-1674.

Sincerely,

Gene Matsushita

Technical Project Manager

Attachments: Attachment 1 - Figures

Attachement 2 - Well Destruction Permits

Attachement 3 - DWR Well Completion Reports

Attachement 4 - Photographs

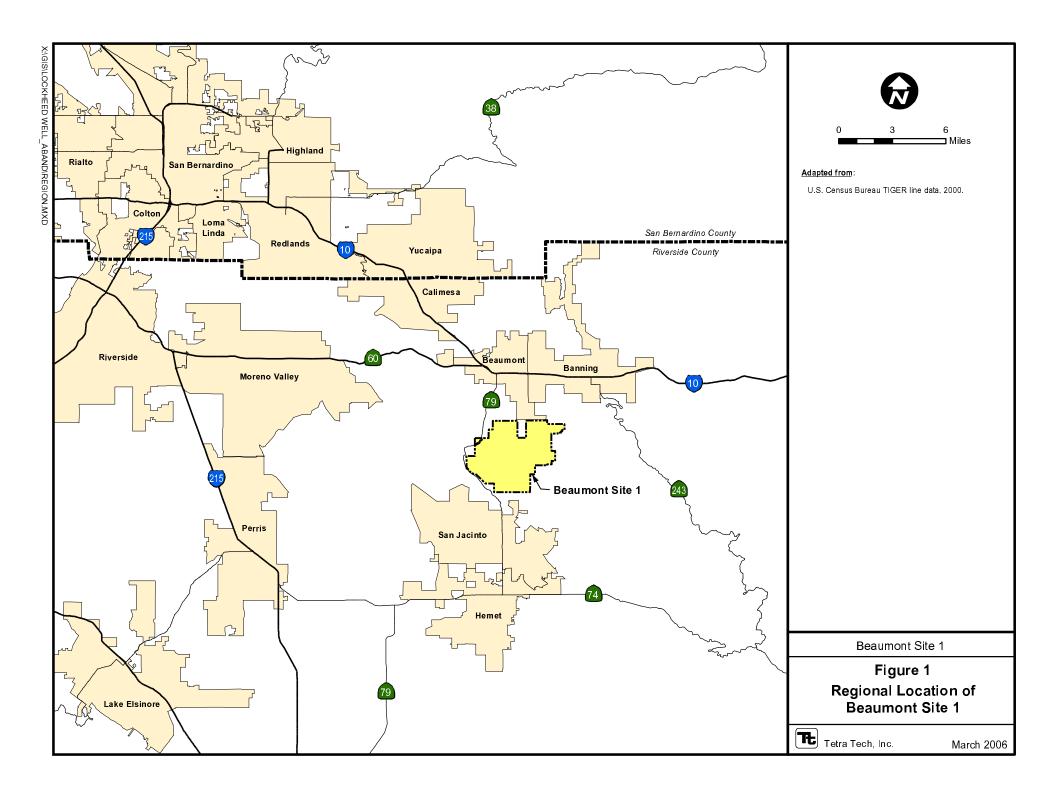
CC: Dan Zogaib, DTSC (2 copies)

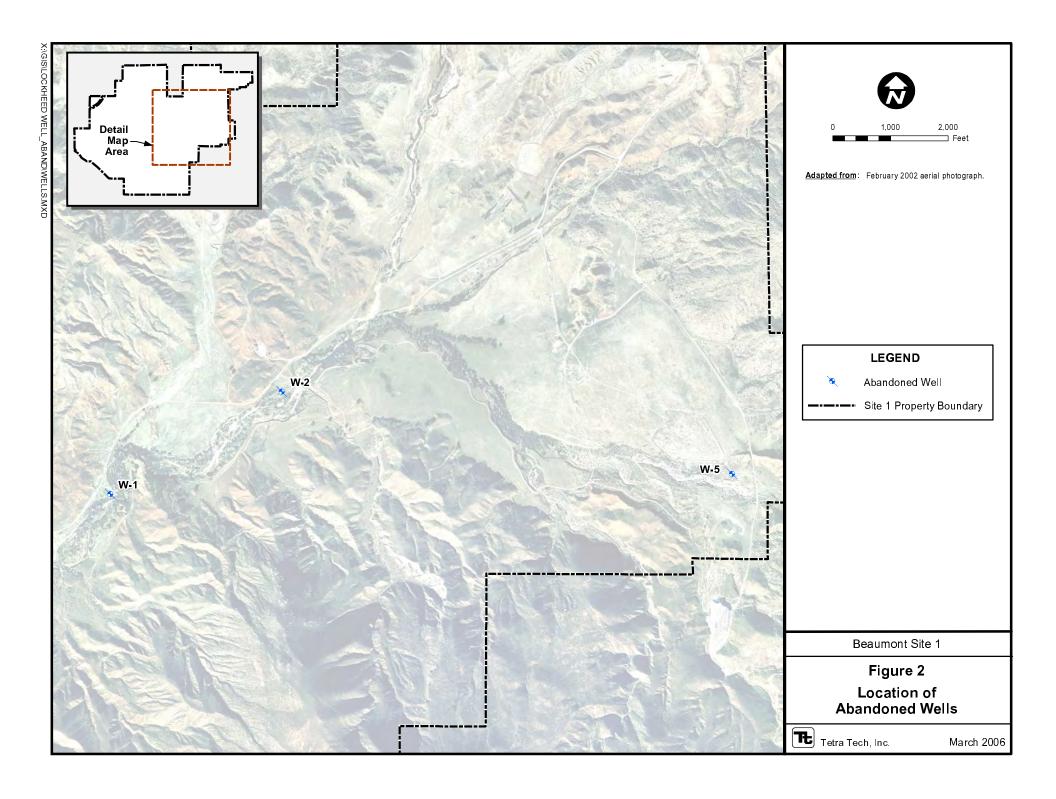
Mr. Ju-tseng Liu May 23, 2006 Page 5 of 4

Bc: T. Villeneuve, Tetra Tech, Inc. N. Shukla, Tetra Tech, Inc.

BUR120Beaumont 1 Production Well Abandonment Report.doc

Attachment 1 Figures





Attachment 2 Well Destruction Permits

28226

WELL DRILLING PERMIT

ALL ELECTRICAL,	PLUMBING,	MECHANI	CAL, AND	STRUCTURAL
REPAIRS AND INS	TALLATIONS	SHALL B	E DONE UN	IDER PERMIT
FROM RIVERSIDE	COUNTY DE	PT. OF BU	JILDING AN	D SAFETY.

Date	January 15, 2004	_
Expir	ation Date 7-8-04	_
Fee	\$153.27	
100	(non-refundable)	

This permit is granted on condition that the person named in the permit will comply with the laws, ordinances and regulations that are now or may hereafter be in force.

LOCATION OF PROPE	SED WEL	L NE /	41	NE 1/4; S	sec3	; I45; HIW	
PHYSICAL ADDRESS	OF WELL	Beaumont Sit	e #1		Community	Beaumont	
APN: 430-040-017 NAME Lockheed	Martin	Well: W-l Corporation		DRILLER	Macer 20	velopment Corporation	
MAILING ADDRESS	2550 N.	Hollywood Way	, 3rd	Floor		ow Highway r, Ca. 91763	
01710 07177							

CITY & STATE

Burbank, Ca. 91505

ABANDONMENT

By Charlene Robbis

Charlene Robbins

DEH-SAN-025 (Rev 10/02)

Distribution: WHITE—Environmental Health Department; YELLOW—Owner; PINK—Well Driller; GOLDENROD—Flood Control

COUNTY OF RIVERSIDE COMMUNITY HEALTH AGENCY DEPARTMENT OF ENVIRONMENTAL HEALTH WELL PERMIT APPLICATION

(For Construction, Reconstruction	ction & Destruction)
 □ 4080 Lemon Street, 2nd Floor / P.O. Box 1206 - Riverside, CA 92502 - (909) 9 □ 82675 Hwy. 111, CAC - Indio, CA 92201 - (760) 863-7000 ☑ 39493 Los Alamos - Murrieta, CA 92563 - (909) 600-6180 	55-8980 [Well: W-1]
NOTE: Any abandoned wells on the property must be properly destroyed before an application for construction or reconstruction can be processed. Please Print Consulting Charles 0577	remit No. 28226 xpiration 7/8/04
1. OWNER: Name Lockhed Martin Corporation Mailing Address 2550 N. Hollywood Way, 3 rd Floor City Burbank State CA Zip 91505 Phone No. (818) 847-0899 2. DATE OF WORK (approximate):	ANNUAL SEAL: Depthft. Borehole Diamin. Conductor Diamin. Annular Thicknessin.
3. WELL DRILLER Name Water Development Corp Riv. Co. Registration No. 04-05 (C-57 License No. 8.	DEPTH OF WELL (feet) ProposedExisting388' DIAMETER OF BORE (in.)/4-16" PRODUCTION WELL CASING INSTALLED:
4. WELL CHECK (check) Community Monitoring Industrial Individual Cathodic Other Agricultural Horizontal	Steel Plastic Other From (ft.) To (ft.) Dia. (in.) Wall (Gage) O 388 14 GRAVEL PACK: Yes No Unknown From to ft.
4A. FOR MONITORING WELL: (Name of Consultant) Name Letva Tech NCPhone 38 - 1674 - 9. 5. TYPE OF WORK (check) New Reconstruction Destruction 5A. If reconstruction or destruction, please describe method on reverse side of attached Plot Plan.	Type of rig
11A. The California Labor code requires Worker's Compensation Insursigns the following certificate: I certify that in the performance employ any person in any manner so as to become subject to Driller's Signature 11B. I have read this application and agree to comply with all laws report to Driller's Signature 11B. Driller's Signature	the Workers Compensation Insurance laws of California.
12. I declare under peralty of perjury under the laws of the State	of California that the information furnished as part of this obligated to obey all requirements of state law and Riverside
Approved subject to the following: A. Notify the Department, , forty-eight (48) hours in advance to ma Prior to sealing of the annular space or filling of the conduct Verify the depth of the conductor (outer) casing prior to furth Ouring destruction of the surface protective slab and pumping During destruction of wells, prior to pouring the sealing mate B. Approved Plot Plan. C. Submit to the Department within thirty (60) days after completion Water Well Driller's Report (DWR 188). NOTE: Property located within the Rancho California Water District.	FOR DEPARTMENT USE ONLY ke an inspection of the following operations: or casing. er drilling and installation of the inner casing. equipment. erial. n of work, a copy of:
D. Other;	

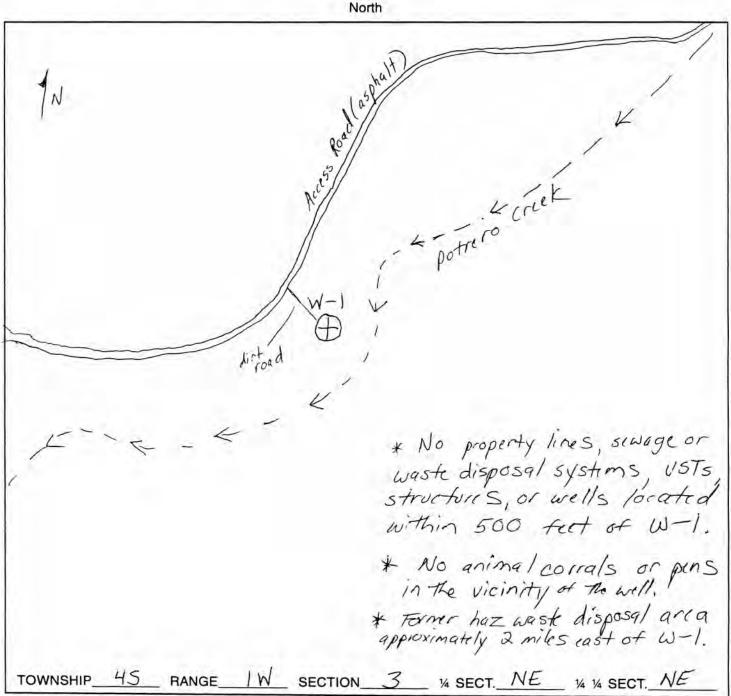
Well: W-1

OWNER'S NAME: Lockheed Martin Corporation

SITE: Beaumont Site # |

CITY: Beaumont CA

ASSESSOR'S P.M. NO.: 430-040-017



NOTE: Please see reverse side for information which must be shown on this Plot plan in order to process this permit application.

SECTION	MAP	MONITY
NW 1/4	1	VICINITY MAP
	NE 14	
	1	
sw ¼	SE 14	
	i	

SAN-185B (Rev 5/02)

30825

WELL DRILLING PERMIT

AV ELECTRICAL BULLERYS MESONAVOLO AND SE	Date September 16, 2005
ALL ELECTRICAL, PLUMBING, MECHANICAL, AND STI REPAIRS AND INSTALLATIONS SHALL BE DONE UNDI FROM RIVERSIDE COUNTY DEPT. OF BUILDING AND	ER PERMIT Expiration Date 3-14-06
	Fee <u>\$154.02</u> (non-refundable)
This permit is granted on condition that the person nan regulations that are now or may hereafter be in force.	ned in the permit will comply with the laws, ordinances and
LOCATION OF PROPOSED WELL	
PHYSICAL ADDRESS OF WELL 17255 Highland St APN: 421-250-012-1 Well: W	N-1
MAILING ADDRESS 2550 N. Hollywood Way, 3rd	1014 E. South Street
CITY & STATE Burbank, CA 91505	By Charlene Rollins
ARAMRONIMENT Distribution: WHITE—En	Charlene Robbins vironmental Health Department; YELLOW—Owner; PINK—Well Driller; GOLDENROD—Flood Control

COUNTY OF RIVERSIDE COMMUNITY HEALTH AGENCY DEPARTMENT OF ENVIRONMENTAL HEALTH WELL PERMIT APPLICATION

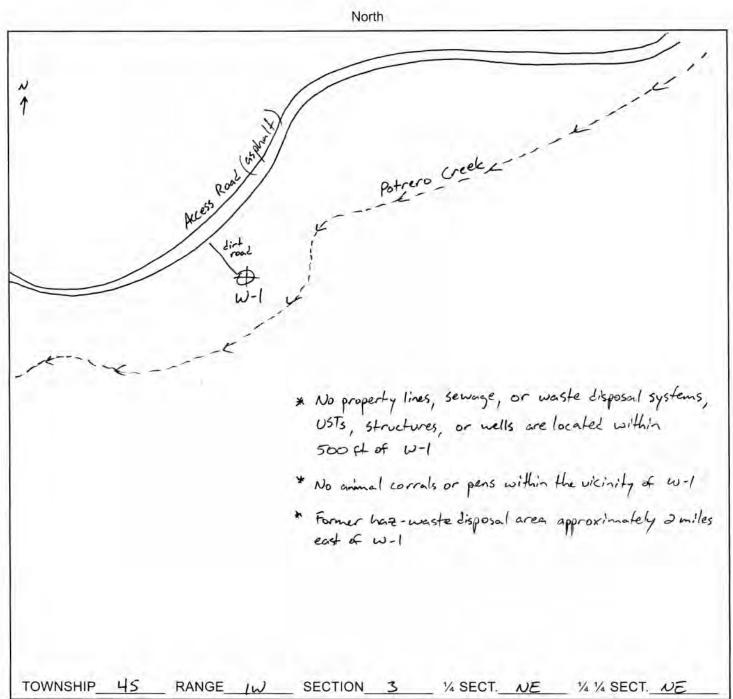
	nstruction & Destruction)
4080 Lemon Street, 2nd Floor / P.O. Box 1206 - Riverside, CA 92502 - 82675 Hwy. 111, CAC - Indio, CA 92201 - (760) 863-7000 39493 Los Alamos - Murrieta, CA 92563 - (909) 600-6180	(909) 955-8980
39493 Los Alamos - Murrieta, CA 92563 - (909) 600-6180	well: W-1
PLEASE REPLY TO ADDRESS CHECKED ABOVE	FOR DEPARTMENT USE ONLY
NOTE: Any chandened wells on the preparty must be	
NOTE: Any abandoned wells on the property must be properly destroyed before an application for construction or reconstruction can be processed.	Permit No
Please Print EHW050846	Expiration 3-74-06
1. OWNER: Name Lockhael Machin Corporation	6. ANNUAL SEAL:
Mailing	Depth ft.
Address 2550 N. Hollywood Way, 3rd Floor	
City Burbank State CA	Borehole Diam in:
Zip 91505 Phone No. (818) 847 - 0899	Conductor Diam in.
2. DATE OF WORK (approximate):	Annular Thickness in.
Start Sept 19 2000 Complete Sept 20, 2005	Sealing Material
3. WELL DRILLER	7. DEPTH OF WELL (feet)
Name JEH DRILLING COINC	Proposed Existing 388
Riv. Co. Registration No. WOR 94-090	DIAMETER OF BORE (in.)
C-57 License No. 740 854 05	8. PRODUCTION WELL CASING INSTALLED:
4. WELL CHECK (check) W-1	☑ Steel ☐ Plastic ☐ Other
Community Monitoring Industrial	From (ft.) To (ft.) Dia. (in.) Wall (Gage)
☑ Individual ☐ Cathodic ☐ Other	0 388 14
☐ Agricultural ☐ Horizontal	GRAVEL PACK: Yes No Unknown
G Agricultural G Horizontal	From to f
4A. FOR MONITORING WELL: (Name of Consultant)	
Name Totro Tech Phone (909) 381-16	79 Type of hig 12/2 2020
5. TYPE OF WORK (check) Chris Surdzial & A 302	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
New Reconstruction Destruction 315-2	998
5A. If reconstruction or destruction, please describe method on reverse side of attached Plot Plan.	10. SEALED ZONES (if applicable): From tof
11A. The California Labor code requires Worker's Compensation	n Insurance as a prerequisite to permit issuance unless the applicar
signs the following certificate: I certify that in the perform	rmance of the work for which this permit is issued, I shall no
	bject to the Workers Compensation Insurance laws of California
Driller's Signature	Date
11B. I have read this application and agree to comply with all la	
Driller's Signature SEIAN I	HOKEN PROS. Date 9/1/0)
12. I declare under penalty of perjury under the laws of the	
	legally obligated to obey all requirements of state law and Riversic
application is true and correct. I also understand that I am County Ordinances in connection with the approval of this	legally obligated to obey all requirements of state law and Riversic application
application is true and correct. I also understand that I am County Ordinances in connection with the approval of this Property Owner's Signature	legally obligated to obey all requirements of state law and Riversic application Date 9-7-05
application is true and correct. I also understand that I am County Ordinances in connection with the approval of this Property Owner's Signature Hornar DISPOSITIO	Date 9 - 7 - 05
application is true and correct. I also understand that I am County Ordinances in connection with the approval of this Property Owner's Signature Thomas DISPOSITIO Approved subject to the following:	Date 9 - 7 - 05 Date PERMIT FOR DEPARTMENT USE ONI
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application is true and correct. I also understand that I am County Ordinances in connection with the approval of this Property Owner's Signature DISPOSITIO Approved subject to the following: A. Notify the Department, , forty-eight (48) hours in advance Prior to sealing of the annular space or filling of the co	Date 9 - 7 - 05 Date 9 - 7 - 05 ON OF PERMIT FOR DEPARTMENT USE ONI to make an inspection of the following operations; anductor casing.
application is true and correct. I also understand that I am County Ordinances in connection with the approval of this Property Owner's Signature DISPOSITIO Approved subject to the following: A. Notify the Department, , forty-eight (48) hours in advance	Date 9 - 7 - 05 ON OF PERMIT FOR DEPARTMENT USE ONI to make an inspection of the following operations; and further drilling and installation of the inner casing.
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Approved subject to the following: A. Notify the Department, , forty-eight (48) hours in advance Prior to sealing of the annular space or filling of the co	Date 9 - 7 - 05 To DEPARTMENT USE ONLY To make an inspection of the following operations; and uctor casing. To further drilling and installation of the inner casing. To pring equipment.
application is true and correct. I also understand that I am County Ordinances in connection with the approval of this Property Owner's Signature Approved subject to the following: A. Notify the Department, , forty-eight (48) hours in advance Prior to sealing of the annular space or filling of the county of the depth of the conductor (outer) casing prior to After installation of the surface protective slab and pure During destruction of wells, prior to pouring the sealing	Date 7 - 7 - 05 Date 7 - 7 - 05 ON OF PERMIT FOR DEPARTMENT USE ONI to make an inspection of the following operations; anductor casing. To further drilling and installation of the inner casing. The make equipment of the inner casing. The make inspection of the inner casing.
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OWNER'S NAME: Lockheel Martin Corporation

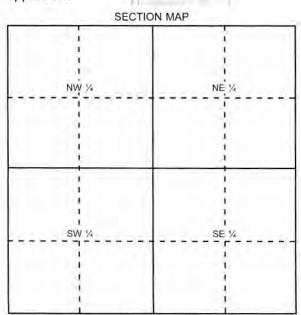
SITE: Beaumont Site #1

CITY: Beaumont, CA

ASSESSOR'S P.M. NO.: 430 - 040 - 017



NOTE: Please see reverse side for information which must be shown on this Plot plan in order to process this permit application.



VICINITY MAP

SAN-185B (Rev 5/02)

ATTACHMENT NO. 1

(FOR WELL PERMIT PLOT PLAN)

- 1. The Plot Plan shall show the proposed well location with respect to the following items which a radius of five-hundred feet (500') from the well;
 - a. Property lines, including ownership.
 - Sewage or waste disposal systems, (including reserved waste disposal expansion areas), or works for carrying or containing sewage or waste.
 - c. Location of underground storage tank(s).
 - d. All intermittent or perennial, natural, or artificial bodies of water or watercourses.
 - e. The approximate drainage pattern of the property.
 - f. Other wells, including abandoned wells.

NOTE: All abandoned wells on this property must be properly destroyed before a new well permit can be issued.

- g. Access road(s) to the well site.
- h. Structures.
- Location of the property on a vicinity map including the legal description of the property (Assessor's Parcel Map/Tract Map Number).
- Location and classification by visual inspection of any solid, liquid, or hazardous waste disposal sites to include municipal and individual package sewage treatment plants within two-thousand (2,000') feet of the proposed well.
- 4. Animal corrals and pens.
- Other information that has been requested by the Health Department to determine if the underground waters will be adequately protected.

This space to be used to describe reconstruction of destruction method used:

Well W-1

Because of the endangered species Stephen's kangaroo rat (SKR) in high density around the well location and the soil type of the area around the well vehicle access to the well for well destruction is limited. Due to the SKR concerns and resultant access problems, as well as well casing current condition, the well will be destroyed by filling with grout from the bottom of the well using a 10-sack sand slurry without perforating the casing. The grout will be pumped into the well using a tremie pipe lowered to the bottom of the well. The grout will be pumped at a slow rate to prevent bridging in the lower casing. The amount of pumped concrete will be compared against the calculated volume of the casing to ensure the entire well casing volume has been filled. Because of the SKR located around the well excavation of the well surface completion will not be possible. The well surface completion will be left in place and the well will be grouted as described above to the top of the casing.

28227

WELL DRILLING PERMIT

ALL ELECTRICAL, PLUMBING, MECHANICAL, AND STRUCTURAL	Date January 15, 2004
REPAIRS AND INSTALLATIONS SHALL BE DONE UNDER PERMIT FROM RIVERSIDE COUNTY DEPT. OF BUILDING AND SAFETY.	Expiration Date 7-8-04
	Fee \$153.27 (non-refundable)
This permit is granted on condition that the person named in the per regulations that are now or may hereafter be in force.	mit will comply with the laws, ordinances and
LOCATION OF PROPOSED WELLSW1/4; SW1/4; Se	ec. 36 ; T 4S ; R 1W
PHYSICAL ADDRESS OF WELL Beaumont Site #1 APN: 430-040-017 Well: W-2	Community Beaumont
NAME Lockheed Martin Corporation DRILLER	Water Development Corporation
MAILING ADDRESS 2550 N. Hollywood Way, 3rd Floor	5566 Arrow Highway Montclair, Ca. 91763
CITY & STATE Burbank, Ca. 91505	A
-RANDONIOSEAIT BY C	hastens Ealder

DEH-SAN-025 (Rev 10/02)

Distribution: WHITE—Environmental Health Department; YELLOW—Owner; PINK—Well Driller; GOLDENROD—Flood Control

Charlene Robbins

COUNTY OF RIVERSIDE COMMUNITY HEALTH AGENCY DEPARTMENT OF ENVIRONMENTAL HEALTH WELL PERMIT APPLICATION

(For Construction, Recor	nstruction & Destruction)
 ☐ 4080 Lemon Street, 2nd Floor / P.O. Box 1206 - Riverside, CA 92502 - ☐ 82675 Hwy, 111, CAC - Indio, CA 92201 - (760) 863-7000 ☐ 39493 Los Alamos - Murrieta, CA 92563 - (909) 600-6180 	(909) 955-8980 Well: W-Z
PLEASE REPLY TO ADDRESS CHECKED ABOVE	FOR DEPARTMENT USE ONLY
NOTE: Any abandoned wells on the property must be	Permit No. 28227
properly destroyed before an application for construction or reconstruction can be processed.	Termit No.
EHW 040016	Expiration 7 8 0 4
Please Print Consultant check 0578	
1. OWNER: Name Lockheed Martin Corporation Mailing	6. ANNUAL SEAL:
Address 2550 N. Hollywood Way, 3rd Floor	Depthft.
City Burbank State CA	Borehole Diam in.
Zip 91505 Phone No. (818) 847-0899	Conductor Diam in.
	Annular Thickness in.
2. DATE OF WORK (approximate):	
StartComplete	Sealing Material
3. WELL DRILLER	7. DEPTH OF WELL (feet)
Name Water Development COVI	
Riv. Co. Registration No. 04-05/	DIAMETER OF BORE (in.) ~ /2-19~8-10"
C-57 License No.	8. PRODUCTION WELL CASING INSTALLED:
4. WELL CHECK (check)	Steel □ Plastic □ Other
	From (ft.) To (ft.) Dia. (in.) Wall (Gage)
☐ Community ☐ Monitoring ☐ Industrial	0 250 8
☐ Cathodic ☐ Other	GRAVEL PACK: Yes No Unknown
\☐ Agricultural ☐ Horizontal	
4A. FOR MONITORING WELL: (Name of Consultant)	Fromtoft.
Name Tetra Tech IMPhone 381-167	Type of rig
5. TYPE OF WORK (check)	9. PERFORATIONS (if applicable):
	From 93 to 250 ft.
☐ New ☐ Reconstruction ☐ Destruction	10. SEALED ZONES (if applicable):
 If reconstruction or destruction, please describe method on reverse side of attached Plot Plan. 	Fromtoft.
signs the following certificate: I certify that in the perfor employ any person in any manner so as to become sub	Insurance as a prerequisite to permit issuance unless the applicant rmance of the work for which this permit is issued, I shall not bject to the Workers Compensation Insurance laws of California. Date
11B. I have read this application and agree to comply with all la	
	Date
andication is true and correct I also understand that I am	e State of California that the information furnished as part of this legally obligated to obey all requirements of state law and Riverside application. Date 11-19-03
Property Owner's Signature	AND DOG II
) 8 0 M) DISPOSITIO	ON OF PERMIT
Approved subject to the following:	FOR DEPARTMENT USE ONLY
A. Notify the Department, , forty-eight (48) hours in advance of Prior to sealing of the annular space or filling of the column Verify the depth of the conductor (outer) casing prior to the protective slab and pure the conductor (outer) casing prior to the surface protective slab and pure the conductor (outer) casing prior to the conductor (outer) case (outer) ca	enductor casing. To further drilling and installation of the inner casing. The inner casing in the inner
During destruction of wells, prior to pouring the sealing	j material.
B. Approved Plot Plan.	
C. Submit to the Department within thirty (60) days after com Water Well Driller's Report (DWR 188).	
NOTE: Property located within the Rancho California Water D District.	District may be subject to an existing Agency Agreement with said
D. Other:	

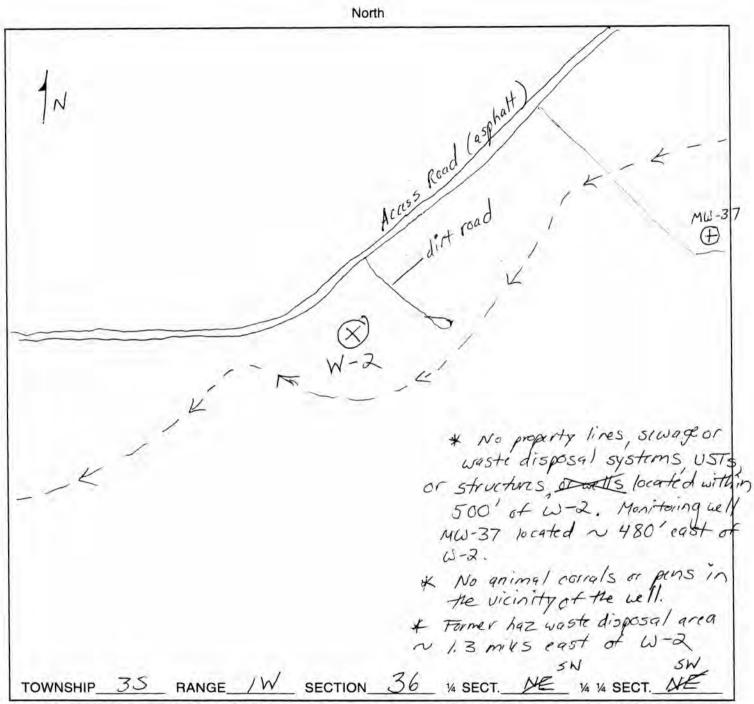
Well: W-2

OWNER'S NAME: Lockhed Martin Corporation

SITE: Beaumont Site #/

CITY: Beaumont, CA

ASSESSOR'S P.M. NO.: 430-040-017



NOTE: Please see reverse side for information which must be shown on this Plot plan in order to process this permit application.

SECTIO	N MAP
NW 1/4	NE 14
1	; ; ;
SW 14	SE W

VICINITY MAP

30826

WELL DRILLING PERMIT

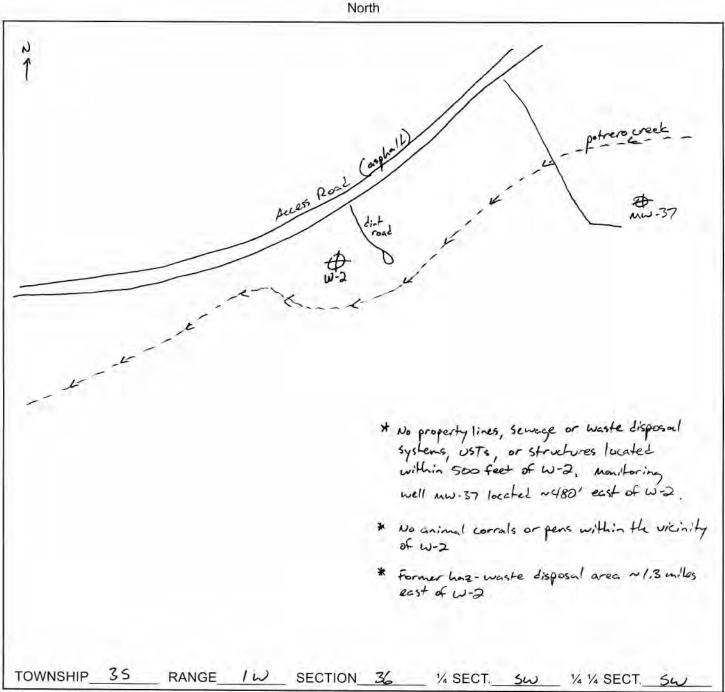
	Date September 16, 2005
ALL ELECTRICAL, PLUMBING, MECHANICAL, AND STRUC REPAIRS AND INSTALLATIONS SHALL BE DONE UNDER P FROM RIVERSIDE COUNTY DEPT. OF BUILDING AND SAFI	PERMIT Expiration Date 3-14-06
,,,=,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Fee \$154.02
	(non-refundable)
This permit is granted on condition that the person named regulations that are now or may hereafter be in force.	in the permit will comply with the laws, ordinances and
LOCATION OF PROPOSED WELL	
PHYSICAL ADDRESS OF WELL 17255 Highland Sprin APN: 421-250-010-9 Well: W-2	
NAME Lockheed Martin Corporation	DRILLER J & H Drilling Co. Inc.
MAILING ADDRESS 2550 N. Hollywood Way, 3rd FI	1014 E. South Street Loor Anaheim, CA 92805
CITY & STATE Burbank, CA 91505	By Charlene Politics
	The Carlotte
DEU PAN DE (Res 10/02)	Charlene Robbins

COUNTY OF RIVERSIDE COMMUNITY HEALTH AGENCY DEPARTMENT OF ENVIRONMENTAL HEALTH WELL PERMIT APPLICATION

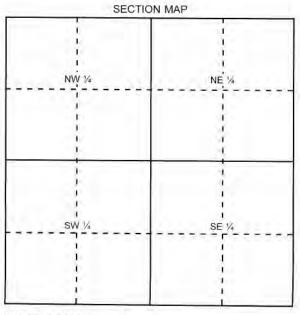
(For Construction, Recor	nstruction & Destruction)
■ 4080 Lemon Street, 2nd Floor / P.O. Box 1206 - Riverside, CA 92502 - 82675 Hwy. 111, CAC - Indio, CA 92201 - (760) 863-7000 ■ 39493 Los Alamos - Murrieta, CA 92563 - (909) 600-6180 PLEASE REPLY TO ADDRESS CHECKED ABOVE	(909) 955-8980 (At Cobb) (Well: W-2)
PLEASE REPLY TO ADDRESS CHECKED ABOVE	FOR DEPARTMENT USE ONLY
NOTE: Any abandoned wells on the property must be properly destroyed before an application for	Permit No
construction or reconstruction can be processed. Please Print Please Print	Expiration
1. OWNER: Name Lockheed Mortin Corporation Mailing	6. ANNUAL SEAL:
Address 2550 N. Hollywood Way, 3rd Floor	Depthft.
City Burbank State CA	Borehole Diam in.
Zip 91505 Phone No. (818) 847 - 0899	Conductor Diam in,
2. DATE OF WORK (approximate):	Annular Thickness in.
Start Sept 20, 200 Complete Sept 21, 240	Sealing Material
3. WELL DRILLER	7. DEPTH OF WELL (feet)
Name JEH DRILLING CO INC	ProposedExisting _250'
Riv. Co. Registration No. WDR 94-090	DIAMETER OF BORE (in.) ~8-10"
C-57 License No. 74085405	8. PRODUCTION WELL CASING INSTALLED:
4. WELL CHECK (check) W-2	☐ Steel ☐ Plastic ☐ Other
☐ Community ☐ Monitoring ☐ Industrial	From (ft.) To (ft.) Dia. (in.) Wall (Gage)
☑ Individual ☐ Cathodic ☐ Other	0 250 8
☐ Agricultural ☐ Horizontal	GRAVEL PACK: Yes No Unknown
	From to ft.
Name Tetro Tech Phone (404) 381-16	Type of rig
5. TYPE OF WORK (check) New Reconstruction Destruction (157) 35- 5A. If reconstruction or destruction, please describe method on reverse side of attached Plot Plan.	2948 From <u>93</u> to <u>250</u> ft. 10. SEALED ZONES (if applicable): From to ft.
signs the following certificate: I certify that in the performance	n Insurance as a prerequisite to permit issuance unless the applicant rmance of the work for which this permit is issued, I shall not bject to the Workers Compensation Insurance laws of California. Date
11B. I have read this application and agree to comply with all la	
Driller's Signature Driller's Signature	HOEW, PRES Date 9/7/05
12. I declare under penalty of perjury under the laws of the application is true and correct. I also understand that I am County Ordinances in connection with the approval of this	e State of California that the information furnished as part of this legally obligated to obey all requirements of state law and Riverside s application.
Property Owner's Signature	M Date 9 - 7 - 05
Approved subject to the following: A. Notify the Department, , forty-eight (48) hours in advance Prior to sealing of the annular space or filling of the co Verify the depth of the conductor (outer) casing prior t After installation of the surface protective slab and pun	onductor casing. to turther drilling and installation of the inner casing. mping equipment.
During destruction of wells, prior to pouring the sealing	g material.
B. Approved Plot Plan.	
C. Submit to the Department within thirty (60) days after con Mater Well Driller's Report (DWR 188).	
NOTE: Property located within the Rancho California Water District.	District may be subject to an existing Agency Agreement with said
D. Other:	

OWNER'S NAME: Loddhed Martin Corporation Begument Site #1 SITE: CITY: Beaumont, CA ASSESSOR'S P.M. NO .: 430 - 040 - 017

well: w-2 **Department Use Only** PERMIT NO.



NOTE: Please see reverse side for information which must be shown on this Plot plan in order to process this permit application.



VICINITY MAP

ATTACHMENT NO. 1

(FOR WELL PERMIT PLOT PLAN)

- 1. The Plot Plan shall show the proposed well location with respect to the following items which a radius of five-hundred feet (500') from the well;
 - a. Property lines, including ownership.
 - Sewage or waste disposal systems, (including reserved waste disposal expansion areas), or works for carrying or containing sewage or waste.
 - c. Location of underground storage tank(s).
 - d. All intermittent or perennial, natural, or artificial bodies of water or watercourses.
 - e. The approximate drainage pattern of the property.
 - f. Other wells, including abandoned wells.

NOTE: All abandoned wells on this property must be properly destroyed before a new well permit can be issued.

- g. Access road(s) to the well site.
- h. Structures.
- Location of the property on a vicinity map including the legal description of the property (Assessor's Parcel Map/Tract Map Number).
- Location and classification by visual inspection of any solid, liquid, or hazardous waste disposal sites to include municipal and individual package sewage treatment plants within two-thousand (2,000') feet of the proposed well.
- 4. Animal corrals and pens.
- Other information that has been requested by the Health Department to determine if the underground waters will be adequately protected.

This space to be used to describe reconstruction or destruction method used:

Well W-2

Because of the endangered species Stephen's kangaroo rat (SKR) in high density around the well location, and the soil type of the area around the well, vehicle access to the well for well destruction is not possible. Due to the SKR concerns and resultant access problems, the well will be destroyed by filling with grout using a 10-sack sand slurry without perforating the casing. The grout will be conveyed to the well using a concrete truck and pump parked on the road with a hose running to the well without the use of a tremie pipe. The hose will be lowered to 20 feet below ground surface in the well with the hose lifted slowly from the well as the concrete fills the casing. The grout will be pumped at a slow rate to prevent bridging in the lower casing. The amount of pumped concrete will be compared against the calculated volume of the casing to ensure the entire well casing volume has been filled. Because of the SKR located around the well excavation of the well surface completion will not be possible. The well surface completion will be left in place and the well will be grouted as described above to the top of the casing.

28228

WELL DRILLING PERMIT

REPAIRS AND INSTALLATIONS SHALL BE DONE UNDER PERMIT FROM RIVERSIDE COUNTY DEPT, OF BUILDING AND SAFETY.	Expiration Date 7-8-04
	Fee \$153.27 (non-refundable)
This permit is granted on condition that the person named in the permit regulations that are now or may hereafter be in force.	it will comply with the laws, ordinances and
LOCATION OF PROPOSED WELL SW 1/4 SW 1/4; Sec	c. 31 ; T 4S ; R 1W
PHYSICAL ADDRESS OF WELL Beaumont Site #1 Co	ommunity Beaumont
NAME Lockheed Martin Corporation DRILLER	Water Development Corporation 5566 Arrow Highway
MAILING ADDRESS 2550 N Hollimond How 2nd Floor	Montoloir Co 01763

2550 N. Hollywood Way, 3rd Floor

ALL ELECTRICAL, PLUMBING. MECHANICAL. AND STRUCTURAL

Burbank, Ca. 91505

Montclair, Ca. 91763

Date January 15, 2004

Charlene Robbins

DEH-SAN-025 (Rev 10/02)

CITY & STATE

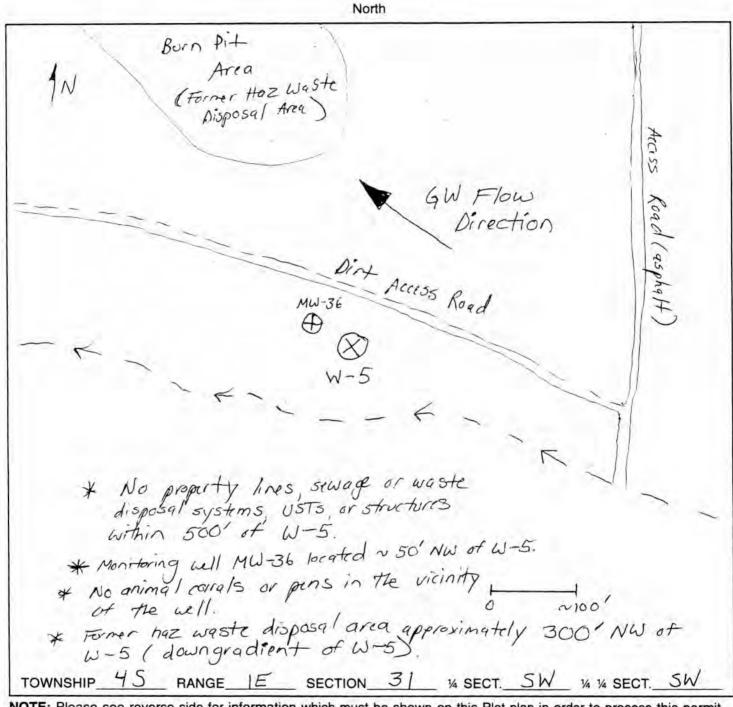
Distribution: WHITE-Environmental Health Department: YELLOW-Owner; PINK-Well Driller; GOLDENROD-Flood Control

DEPARTMENT OF ENVIRONMENTAL HEALTH WELL PERMIT APPLICATION

(For Construction, Reco	
82675 Hwy. 111, CAC - Indio, CA 92201 - (760) 863-7000 39493 Los Alamos - Murrieta, CA 92563 - (909) 600-6180	(303) 333-0300
NOTE: Any abandoned wells on the property must be properly destroyed before an application for construction or reconstruction can be processed. Please Print Consultary Chee 6 057	Permit No. 28228 Expiration 7/8/04
1. OWNER: Name Lockheed Martin Corporation Mailing Address 2550 N. Hollywood Way, 3rd Floor City Burbank State CA	6. ANNUAL SEAL: Depthft. Borehole Diamin.
Zip 91505 Phone No. (818) 847-0899	Conductor Diam in.
2. DATE OF WORK (approximate):	Annular Thickness in.
StartComplete	Sealing Material
3. WELL DRILLER Name Water Development Coy	7. DEPTH OF WELL (feet) ProposedExisting/2.8 ′
Riv. Co. Registration NoV	DIAMETER OF BORE (in.) ~ 6-8"
C-57 License No.	8. PRODUCTION WELL CASING INSTALLED:
4. WELL CHECK (check)	X Steel ☐ Plastic ☐ Other
☐ Community ☐ Monitoring ☐ Industrial	From (ft.) To (ft.) Dia, (in.) Wall (Gage) 0 128 6
☐ Cathodic ☐ Other ☐ Agricultural ☐ Horizontal	GRAVEL PACK: Yes No Unknown
	Fromtoft.
4A. FOR MONITORING WELL: (Name of Consultant) Name To tru Tech /NC Phone 38 - 1474	
5. TYPE OF WORK (check) ☐ New ☐ Reconstruction ☑ Destruction	PERFORATIONS (if applicable): From 60 to 128 ft.
5A. If reconstruction or destruction, please describe method on reverse side of attached Plot Plan.	10. SEALED ZONES (if applicable): Fromtoft.
signs the following certificate: I certify that in the performance employ any person in any manner so as to become subject that in the performance employ any person in any manner so as to become subject that in the performance employers are supplied to the performance employers. Driller's Signature	Insurance as a prerequisite to permit issuance unless the applicant mance of the work for which this permit is issued, I shall not ject to the Workers Compensation Insurance laws of California. Date
11B. I have read this application and agree to comply with all la	
application is true and correct. I also understand that I am I	State of California that the information furnished as part of this egally obligated to obey all requirements of state law and Riverside application. Date
1 (8 (00) MC DISPOSITION	N OF PERMIT
Approved subject to the following: A. Notify the Department, , forty-eight (48) hours in advance to Prior to sealing of the annular space or filling of the con	FOR DEPARTMENT USE ONLY o make an inspection of the following operations:
Verify the depth of the conductor (outer) casing prior to After installation of the surface protective slab and pump During destruction of wells, prior to pouring the sealing	further drilling and installation of the inner casing.
B. Approved Plot Plan.	
C. Submit to the Department within thirty (60) days after comp Water Well Driller's Report (DWR 188).	eletion of work, a copy of:
NOTE: Property located within the Rancho California Water Dis District.	strict may be subject to an existing Agency Agreement with said
D. Other:	

Well: W-5

SITE: Beaumont	- Sit #1	Department Use Only
CITY: Beaumont	- CA	PERMIT NO



NOTE: Please see reverse side for information which must be shown on this Plot plan in order to process this permit

N MAP	VICINITY MAP
NE 14	
1	
SE 14	
1 1 1	

30827

WELL DRILLING PERMIT

		Date Sep	tember 16	, 2005	
ALL ELECTRICAL, PLUMBING, MECHANICAL, AND STI REPAIRS AND INSTALLATIONS SHALL BE DONE UNDI FROM RIVERSIDE COUNTY DEPT. OF BUILDING AND	ER PERMIT	Expiration [
		Fee \$154	.02		
		1.25	(non-refund	(aldab	
This permit is granted on condition that the person nan regulations that are now or may hereafter be in force.	ned in the permit	will comply w	ith the laws	s, ordinar	nces and
LOCATION OF PROPOSED WELL1/4		31 ;	T3s	; R _	1W_
PHYSICAL ADDRESS OF WELL_17255 Highland St	orings Rd Con	nmunity <u>Be</u>	aumont		
APN: 421-250-005-5 Well: V	N−5 DRILLER				
APN: 421-250-005-5 Well: W	DRILLER	J & H Dri	lling Co.	. Inc.	
MAILING ADDRESS		1014 E. S	outh Str	eet	
2550 N. Hollywood Way, 3rd	d Floor	Anaheim,	CA 92805		
CITY & STATE Burbank, CA 91505	1.		D		
	By Ch	arlene L	alelies		
BANDONMENT	Charl	Lene Robbin	s		

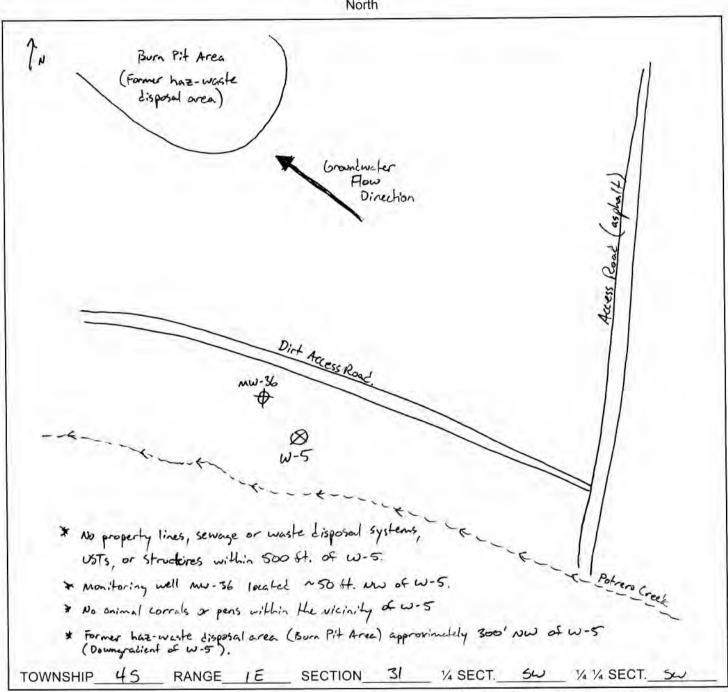
COUNTY OF RIVERSIDE COMMUNITY HEALTH AGENCY DEPARTMENT OF ENVIRONMENTAL HEALTH WELL PERMIT APPLICATION

(For Construction, Reconstruction & Destruction)

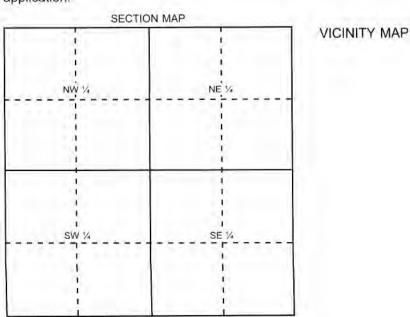
MINUS	
4080 Lemon Street, 2nd Floor / P.O. Box 1206 - Riverside, CA 92502 - 82675 Hwy. 111, CAC - Indio, CA 92201 - (760) 863-7000 39493 Los Alamos - Murrieta, CA 92563 - (909) 600-6180 PLEASE REPLY TO ADDRESS CHECKED ABOVE	FOR DEPARTMENT USE ONLY
NOTE: Any abandoned wells on the property must be properly destroyed before an application for	Permit No
construction or reconstruction can be processed.	Expiration
Please Print (#W050848	
. OWNER: Name Lodcheed Martin Corporation Mailing	6. ANNUAL SEAL:
Address 2550 N. Hollywood Way, 3" Floor	Depthft.
City Burbank State CA	Borehole Diam in.
Zip 91505 Phone No. (818) 847-0899	Conductor Diam in.
DATE OF WORK (approximate):	Annular Thickness in.
Start Sept 23, 2000 Complete Sept 23, 2000	Sealing Material
. WELL DRILLER	7. DEPTH OF WELL (feet)
Name JEH DRILLING (O INC	Proposed Existing 128
Riv. Co. Registration No. WOR 97-090	DIAMETER OF BORE (in.) ~6-8"
C-57 License No. 740854 CS	8. PRODUCTION WELL CASING INSTALLED:
WELL CHECK (check)	Steel □ Plastic □ Other
☐ Community ☐ Monitoring ☐ Industrial	From (ft.) To (ft.) Dia. (in.) Wall (Gage)
☑ Individual ☐ Cathodic ☐ Other	0 138 6 10
☐ Agricultural ☐ Horizontal	GRAVEL PACK: Yes No unknown
A Agricultural Carriottal	From to
Destruction Destruction (951) 315	2998 From 60 to 128
5A. If reconstruction or destruction, please describe method	10. SEALED ZONES (if applicable):
 5A. If reconstruction or destruction, please describe method on reverse side of attached Plot Plan. 11A. The California Labor code requires Worker's Compensation 	Fromtototaller application in Insurance as a prerequisite to permit issuance unless the application in Insurance as a prerequisite to permit issuance unless the application in Insurance as a prerequisite to permit issuance unless the application in Insurance as a prerequisite to permit issuance unless the application in Insurance as a prerequisite to permit issuance unless the application in Insurance as a prerequisite to permit issuance unless the application in Insurance as a prerequisite to permit issuance unless the application in Insurance as a prerequisite to permit issuance unless the application in Insurance as a prerequisite to permit issuance unless the application in Insurance as a prerequisite to permit issuance unless the application in Insurance as a prerequisite to permit issuance unless the application in Insurance as a prerequisite to permit issuance unless the application in Insurance as a prerequisite to permit issuance unless the application in Insurance as a prerequisite to permit issuance unless the application in Insurance as a prerequisite and the Insurance as a prerequisite and the Insurance and Insurance as a prerequisite and Insurance and Insuran
5A. If reconstruction or destruction, please describe method on reverse side of attached Plot Plan. 11A. The California Labor code requires Worker's Compensation signs the following certificate: I certify that in the perform employ any person in any manner so as to become substitute. I have read this application and square to comply with all laborates Signature. 11B. I have read this application and square to comply with all laborates Signature. 12. I declare under penalty of perjury under the laws of the application is true and correct. I also understand that I am County Ordinances in connection with the approval of this	Fromto
A. If reconstruction or destruction, please describe method on reverse side of attached Plot Plan. 11A. The California Labor code requires Worker's Compensation signs the following certificate: I certify that in the performent of the complex and person in any manner so as to become substitute. 11B. I have read this application and square to comply with all laborates Signature. 12. I declare under penalty of perjury under the laws of the application is true and correct. I also understand that I am County Ordinances in connection with the approval of this Property Owner's Signature.	Insurance as a prerequisite to permit issuance unless the application in Insurance of the work for which this permit is issued, I shall reduce to the Workers Compensation Insurance laws of California Date Date aws regulating the type of work being performed. Date State of California that the information furnished as part of the legally obligated to obey all requirements of state law and Riversia application. Date 9-7-6:
A. If reconstruction or destruction, please describe method on reverse side of attached Plot Plan. 11A. The California Labor code requires Worker's Compensation signs the following certificate: I certify that in the perform employ any person in any manner so as to become substitute and partie to comply with all laborated by the signature application is true and correct. I also understand that I am County Ordinances in connection with the approval of this Property Owner's Signature and correct. I also understand that I am County Ordinances in connection with the approval of this Property Owner's Signature and correct. I also understand that I am County Ordinances in connection with the approval of this Property Owner's Signature and County Ordinances in C	From
A. If reconstruction or destruction, please describe method on reverse side of attached Plot Plan. 11A. The California Labor code requires Worker's Compensation signs the following certificate: I certify that in the performent of the performent of the complex and person in any manner so as to become substitute. 11B. I have read this application and square to comply with all laborates Signature. 11C. I declare under penalty of perjury under the laws of the application is true and correct. I also understand that I am County Ordinances in connection with the approval of this Property Owner's Signature. Approved subject to the following:	From to Insurance as a prerequisite to permit issuance unless the applical remance of the work for which this permit is issued, I shall not be to the Workers Compensation Insurance laws of California Date aws regulating the type of work being performed. Date 9/7/05 a State of California that the information furnished as part of the legally obligated to obey all requirements of state law and Riversia application. Date 9-7-6: Date 9-7-6:
A. If reconstruction or destruction, please describe method on reverse side of attached Plot Plan. 11A. The California Labor code requires Worker's Compensation signs the following certificate: I certify that in the performent of the performent	From
A. If reconstruction or destruction, please describe method on reverse side of attached Plot Plan. 11A. The California Labor code requires Worker's Compensation signs the following certificate: I certify that in the performent of the performent of the complex and person in any manner so as to become substitute. 11B. I have read this application and square to comply with all laborates Signature. 12. I declare under penalty of perjury under the laws of the application is true and correct. I also understand that I am County Ordinances in connection with the approval of this Property Owner's Signature. Approved subject to the following: A. Notify the Department, , forty-eight (48) hours in advance. Prior to sealing of the annular space or filling of the complex of the conductor (outer) casing prior to the conductor (From to Insurance as a prerequisite to permit issuance unless the applical remance of the work for which this permit is issued, I shall not be to the Workers Compensation Insurance laws of California Date Date
A. If reconstruction or destruction, please describe method on reverse side of attached Plot Plan. 11A. The California Labor code requires Worker's Compensation signs the following certificate: I certify that in the performance of the employ any person in any manner so as to become substitute of the performance of the performance of the employ and person in any manner so as to become substitute. 11B. I have read this application and partie to comply with all laborate of the application is true and correct. I also understand that I am County Ordinances in connection with the approval of this Property Owner's Signature of the approval of this Property Owner's Signature of the Institute of the County Ordinance of the annular space or filling of the county Ordinance of the conductor (outer) casing prior to After installation of the surface protective slab and pure of the surface protective slab and pure of the conductor (outer) casing prior to the conductor of the surface protective slab and pure of the surface protective slab and pure of the surface protective slab and pure of the conductor of the surface protective slab and pure of the surface protection of the surface protecti	Insurance as a prerequisite to permit issuance unless the applicate remance of the work for which this permit is issued, I shall not be provided to the Workers Compensation Insurance laws of California Date Date aws regulating the type of work being performed. Date State of California that the information furnished as part of the legally obligated to obey all requirements of state law and Riversians application. Date 9-7-4: DN OF PERMIT FOR DEPARTMENT USE ON to make an inspection of the following operations: anductor casing. To further drilling and installation of the inner casing. The provided to the permit is suance unless the application of the inner casing. The provided to the permit is issuance unless the application of the inner casing.
Approved subject to the following: A. Notify the Department, , forty-eight (48) hours in advance Disposition of the sealing o	Insurance as a prerequisite to permit issuance unless the applicate remance of the work for which this permit is issued, I shall not be provided to the Workers Compensation Insurance laws of California Date Date
Approved subject to the following: A. Notify the Department, , forty-eight (48) hours in advance Prior to sealing of the annular space or filling of the column of the surface protective slab and pundant of the surface protective slab and pundant of the sealing B. Approved Plot Plan.	Insurance as a prerequisite to permit issuance unless the application of the work for which this permit is issued, I shall not be provided to the Workers Compensation Insurance laws of California Date Date
A. Notify the Department, forty-eight (48) hours in advance Prior to sealing of the annular space or filling of the county Overify the depth of the conductor (outer) casing prior to pouring the sealing Approved Plot Plan. A. Notify the Department within thirty (60) days after comparison of water well During destruction of wells, prior to pouring the sealing B. Approved Plot Plan. C. Submit to the Department within thirty (60) days after comparison of the prior of the Department within thirty (60) days after comparison of the prior to the popular of the popular of the popular of the popular of the sealing B. Approved Plot Plan. C. Submit to the Department within thirty (60) days after comparison of the prior to the popular of th	In Insurance as a prerequisite to permit issuance unless the applicate mance of the work for which this permit is issued, I shall notice to the Workers Compensation Insurance laws of California Date Date Date Date State of California that the information furnished as part of the legally obligated to obey all requirements of state law and Riversia is application. Date POR DEPARTMENT USE ONE To make an inspection of the following operations: and onductor casing. To further drilling and installation of the inner casing. In material.
A. Notify the Department, forty-eight (48) hours in advance Prior to sealing of the annular space or filling of the county Overify the depth of the conductor (outer) casing prior to pouring the sealing Approved Plot Plan. A. Notify the Department within thirty (60) days after comparison of water well During destruction of wells, prior to pouring the sealing B. Approved Plot Plan. C. Submit to the Department within thirty (60) days after comparison of the prior of the Department within thirty (60) days after comparison of the prior to the popular of the popular of the popular of the popular of the sealing B. Approved Plot Plan. C. Submit to the Department within thirty (60) days after comparison of the prior to the popular of th	Insurance as a prerequisite to permit issuance unless the application of the work for which this permit is issued, I shall not be provided to the Workers Compensation Insurance laws of California Date Date

OWNER'S NAME:	Lookheed Martin Corporation	[Well: W-5]
SITE:	Beaumont Site #1	Department Use Only PERMIT NO.
CITY:	Beaumont, CA	

North



NOTE: Please see reverse side for information which must be shown on this Plot plan in order to process this permit application.



ATTACHMENT NO. 1

(FOR WELL PERMIT PLOT PLAN)

- The Plot Plan shall show the proposed well location with respect to the following items which a radius of five-hundred feet (500') from the well;
 - a. Property lines, including ownership.
 - Sewage or waste disposal systems, (including reserved waste disposal expansion areas), or works for carrying or containing sewage or waste.
 - c. Location of underground storage tank(s).
 - d. All intermittent or perennial, natural, or artificial bodies of water or watercourses.
 - e. The approximate drainage pattern of the property.
 - f. Other wells, including abandoned wells.

NOTE: All abandoned wells on this property must be properly destroyed before a new well permit can be issued.

- g. Access road(s) to the well site.
- h. Structures.
- Location of the property on a vicinity map including the legal description of the property (Assessor's Parcel Map/Tract Map Number).
- Location and classification by visual inspection of any solid, liquid, or hazardous waste disposal sites to include municipal and individual package sewage treatment plants within two-thousand (2,000') feet of the proposed well.
- 4. Animal corrals and pens.
- Other information that has been requested by the Health Department to determine if the underground waters will be adequately protected.

This space to be used to describe reconstruction or destruction method used:

Well W-5

Because of the endangered species Stephen's kangaroo rat (SKR) in high density around the well location and the soil type of the area around the well vehicle access to the well for well destruction is limited. Due to the SKR concerns and resultant access problems, as well as well casing current condition, the well will be destroyed by filling with grout from the bottom of the well using a 10-sack sand slurry without perforating the casing. The grout will be pumped into the well using a tremie pipe lowered to the bottom of the well. The grout will be pumped at a slow rate to prevent bridging in the lower casing. The amount of pumped concrete will be compared against the calculated volume of the casing to ensure the entire well casing volume has been filled. Because of the SKR located around the well excavation of the well surface completion will not be possible. The well surface completion will be left in place and the well will be grouted as described above to the top of the casing.

******************* SET: HW050846 Riverside County LMS *************** Receipt Number: R0519023 Amount: 462.06 09/15/05 16:13
Payment Method: CK Notation: 0666 Init: CY Init: CY ****************** Set Members: EHW050846 154.02 EHW050847 154.02 EHW050848 Account Code Description
100004200420774830 ENVH: WELL PERMIT FEES Paid 453.00 202033100200772210 ENVH: LMS SURCHARGE FEES 9.06 Total fee Payments: 462.06

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Attachment 3 **DWR Well Completion Reports**

TRIPLICATE Owner's Copy

WELL STATE OF CALIFORNIA COMPLETION REPORT

Page 1 of 1 Owner's Well No. Well #1

No. e016904

Date Work Began 9/7/2005

, Ended 10/14/2005

Local Permit Agency Riverside D. E. H. Permit No. 308-25

Permit Date 9/19/2005

-12 7-1	1000	
	STATE WEL	L NO./ STATION NO.
1	1	
LATITL	IDE	LONGITUDE

	GEOLOGIC LOG	WELL OWNER -	
ORIENTATION (✓)	✓ VERTICAL — HORIZONTAL — ANGLE — (SPECIFY)	Name Lockheed Martin Corporation	
DEPTH FROM	DRILLING ROTARY FLUID	Mailing Address 6901 Rockledge Dr.	MD 20817
SURFACE	DESCRIPTION	Bethesda	STATE ZIP
Ft. to Ft.	Describe material, grain, size, color, etc.	WELL LOCATION—	SINIC ZII
	This well was located in a Federally protected	Address Highland Springs Rd.	
	Endagered Species Zone (Stephen's Kangaroo	City Beaumont CA	
	Rat [SKR]). Television inspection revealed partial	County Riverside	
	collapse of casing at 92', 213', 245' and 272' BGS.	APN Book 430 Page 040 Parcel 017	
	Perforations began at 210' BGS to the T.D. @388'.	Township 3 S Range 1 W Section 36	
	A submersible pump was removed and a 14" cas-		16 57 44 W
	ing extension was welded in place. The extension	DEG. MIN. SEC. LOCATION SKETCH	DEG. MIN. SEC. ACTIVITY (✓)
	allowed the displaced water to be captured and	NORTH -	NEW WELL
	removed for disposal. The well was tremie pumped		MODIFICATION/REPAIR
	in two stages beginning at 357' BGS using 10 cyds		Deepen
	of 10 sack pumpable cement grout. After curing for		- Other (Specify)
	three days and additional 5.5 cyds was pumped in		✓ DESTROY (Describe
	from a depth of 137 ft to the surface. Beacuse of		Procedures and Materials Under "GEOLOGIC LOG"
	the SKRs the casing was not excavated. A steel		PLANNED USES(∠)
	cover was welded in place at the ground surface.		WATER SUPPLY
	The cover will be stamped dating the destruction	WEST	Domestic Public Imigation Industrial
	date and method.	2	
			MONITORING
			CATHODIC PROTECTION
			HEAT EXCHANGE
			DIRECT PUSH
			INJECTION
			VAPOR EXTRACTION
		SOUTH -	SPARGING
		Illustrate or Describe Distance of Well from Roads, Buildings, Fences, Rivers, etc. and attach a map. Use additional paper if	OTHER (SPECIFY)
		necessary. PLEASE BE ACCURATE & COMPLETE.	
		DEPTH TO FIRST WATER 23 (Ft.) BELOW SURFACE	
		DEPTH OF STATIC	
		WATER LEVEL 23 (Ft.) & DATE MEASURED	9/19/2005
The Late of	200	ESTIMATED YIELD * (GPM) & TEST TYPE_	
TOTAL DEPTH OF	10.111	TEST LENGTH (Hrs.) TOTAL DRAWDOWN	(Ft.)
TOTAL DEPTH OF	COMPLETED WELL 388 (Feet)	May not be representative of a well's long-term yiel	ld.

DEPT		BORE -		CASING (S) DEPTH		ANNULAR MATERIAL											
FROM SUR	FACE	BORE - HOLE DIA.			(<)		INTERNAL	CHICE	CLOT CITE	FROM	FROM SURFACE			1	TYPE		
Ft. to	Ft.	(Inches)		MATERIAL / GRADE	DIAMETER (Inches)	GAUGE OR WALL THICKNESS	SLOT SIZE IF ANY (Inches)	Ft.	to	Ft.	CE- MENT (✓)	BEN- TONITE	FILL (✓)	FILTER PACK (TYPE/SIZE)			
0	210	16	1		IT L	STEEL	14	.250	0		0	20	1				
210	388	16				STEEL	14	.250	.250		1						
							1										
			_					-									

ATTACHMENTS ()		CERTIFICATION STATEM	ENT -	
Geologic Log Well Construction Diagram Geophysical Log(s)	I, the undersigned, certify that this report is completed NAME J. & H. Drilling Co., Inc. (PERSON, FIRM, OR CORPORATION)		nowledge and belief.	
Soil/Water Chemical Analysis Other map and photo ATTACH ADDITIONAL INFORMATION, IF IT EXISTS.	1014 E. South-St. ADDRESS Signed WELL-DIALLEN/AUTHORIZED REPRES	Anahei	TY 10/27/05 DATE SIGNED	92805-5348 ZIP 0854 7 LICENSE NUMBER

TRIPLICATE Owner's Copy

STATE OF CALIFORNIA

WELL COMPLETION REPORT Refer to Instruction Pamphlet

Page 1 of 1 Owner's Well No. Well #2

No. e016905

Date Work Began 9/7/2005

_, Ended 10/14/2005

Local Permit Agency Riverside Co. D.E.H.
Permit No. 308-26 Permit Date 9/19/2005

STATE WELL NO./ STATION NO.		
LONGITURE LONGITURE	STATE WEL	LL NO./ STATION NO.
LONGITUDE LONGITUDE		
LATITUDE LONGITUDE		
LATITUDE		
	LATITUDE	LONGITUDE
	LATITUDE	LONGITUDE

	GEOLOGIC LOG -	WELL OWNER —			
ORIENTATION (✓)	VERTICAL — HORIZONTAL — ANGLE — (SPECIFY)	Name Lockheed Martin Corporation			
DEPTH FROM	DRILLING ROTARY FLUID	Mailing Address 6901 Rockledge Dr.	MD 20047		
SURFACE	DESCRIPTION	Bethesda	MD 20817 STATE ZIP		
Ft. to Ft.	Describe material, grain, size, color, etc.	WELL LOCATION	STATE ZIP		
	This well was located in a Federally protected	Address Highland Springs Rd.			
	Endangered Species Zone (Stephen's Kangaroo	City Beaumont CA			
	Rat (SKR)). Television inspection revealed perfor-	County Riverside			
	ations starting at 93' BGS and continuing to a soft	APN Book 430 Page 040 Parcel 017			
	bottom at 247' BGS. This well was situated in a	Township 3 S Range 1 W Section 36			
	high concentration of SKR burrows and equipment	Latitude 33 51 41 N 1	16 57 9 W		
	was not allowed to drive near the well platform. A	DEG. MIN. SEC. LOCATION SKETCH	DEG. MIN. SEC. ACTIVITY () -		
	steel pressure head was welded to the top of the	NORTH	NEW WELL		
	8" steel casing with a pressure guage and grout	200	MODIFICATION/REPAIR		
	inlet fittng attached. Two hundred twenty five (225')		— Deepen		
	feet of grout hose was laid on protective mats to		Other (Specify)		
	allow the pressure pumping of this well. 4 cu yd of	1.0	✓ DESTROY (Describe		
	10 sack pumpable grout were forced into the well		Procedures and Mater Under "GEOLOGIC LO		
	at the surface. The well casing was filled, as was		PLANNED USES (
	app8 to 1 cubic yard of annular space. The well		WATER SUPPLY		
		TS	Domestic Public		
	50 PSI. The grout was allowed to set and then a	WEST	Irrigation _ Indust		
	steel plate was welded to the top of the filled well		MONITORING —		
	casing. The cover will be stamped dating the		TEST WELL		
	destruction date and method.	II. Vi	HEAT EXCHANGE		
	Social data and monitor.		DIRECT PUSH_		
			INJECTION		
			VAPOR EXTRACTION		
		SOUTH -	SPARGING _		
		Illustrate or Describe Distance of Well from Roads, Buildings, Fences, Rivers, etc. and attach a map. Use additional paper if necessary. PLEASE BE ACCURATE & COMPLETE.	REMEDIATION OTHER (SPECIFY)		
		WATER LEVEL & YIELD OF COMPL			
		DEPTH TO FIRST WATER 18 (Ft.) BELOW SURFACE	E		
		DEPTH OF STATIC WATER LEVEL 18 (Ft.) & DATE MEASURED	9/19/2005		
And to the second the	250	ESTIMATED YIELD * (GPM) & TEST TYPE			
TOTAL DEPTH OF		TEST LENGTH (Hrs.) TOTAL DRAWDOWN	_ (Ft.)		
OTAL DEPTH OF	COMPLETED WELL 250 (Feet)	May not be representative of a well's long-term yiel	d.		

DEP		ROPE					C	ASING (S)			1	EPT	H	ANNULAR MATERIAL			
FROM SURFACE		BORE -	T		E (111		1000					FACE	TYPE		PE	
Ft. to	FI.	DIA. (Inches)	BLANK	SCREEN	CON-	FILL PIPE	MATERIAL / GRADE	INTERNAL DIAMETER (Inches)	GAUGE OR WALL THICKNESS	SLOT SIZE IF ANY (Inches)	Ft.	to	FL	CE- MENT (✓)	BEN- TONITE	FILL (✓)	FILTER PACK (TYPE/SIZE)
0	93	10	1		1		STEEL	8	.250			П					
93	250	10	-	-	1		STEEL	8	.250	.250		4					
												1					
			H		H							ł					
	ATTACE	IMENTS	(1)			17			CERTIFICA	TIONS	TAT	EMEN	т —			

ATTACHMENTS (Z)
Geologic Log
Well Construction Diagram
Geophysical Log(s)
Soil/Water Chemical Analysis Other map and photo
ATTACH ADDITIONAL INFORMATION, IF IT EXISTS.

I, the undersigned, certify that this report is complete and accurate to NAME J. & H. Drilling Co., Inc.	the best of my knowledge and belief		
(PERSON, FIRM, OR CORPORATION) (TYPED OR PRINTE	D)	1	
1014 E. South St. ADDRESS Signed WELL DRILLER/AUTHORIZED REPRESENTATIVE	Anaheim	CA	92805-5348
ADDRESS VALUE - AND - AN	6 CITY	STATE	ZIP
Signed SKIAN L. HOVEN PRE	10/27/05	740	0854
WELL DRILLER/AUTHORIZED REPRESENTATIVE	/ DATE SIGNED	C-5	7 LICENSE NUMBER

TRIPLICATE Owner's Copy

Page 1 of 1

STATE OF CALIFORNIA

WELL COMPLETION REPORT Refer to Instruction Pamphlet

No. e016906

Owner's Well No. Well #5 Date Work Began 9/7/2005

., Ended 10/14/2005

Local Permit Agency Riverside Co. D. F. H. Permit No. 308-27 Permit Date 9/19/2005

-1	1	1					
	STA	TE WEL	L NO./	STATIO	N NC).	
	11	0 11	11-	11	1		
LATIT	UDE		11	LON	GITUE	E	

ORIENTATION (≰) DEPTH FROM SURFACE Ft. to Ft.	DESCRIPTION Describe material, grain, size, color, etc. This well was located in a Federally protected Endangered Species Zone (Stephen's Kangaroo Rat {SKR}}. Television inspection revealed horizontal seams ea. 3ft throughout the well and riveted stove pipe casing. Mills knife perforations began at 60' BGS continuing to the bottom at 127.5' BGS. During low water periods water cascaded from perforation at 90' to a SWL at 91' BGS. SWL in Sept. of 2005 was noted at 65.5' with a soft bottom at 126' BGS. Protective matting was laid to allow access by rig and 3" tremie pipe was set to 123' BGS. Well casin volume was 3.2 cu yds and 5.5 cu yds of 10 sack pumpable grout were accepted. Upon reaching the surface, grout began oozing from the surrounding ground. App. 2.3 cubic yards of annular space was filled with grout. The grout was allowed to set, the above ground casing was trimmed to 1 ft above ground surface and a steel cover was welded to the well casing. The cover will be stamped dating the destruction date and method.	Latitude 33 51 27 N DEG MIN. SEC. LOCATION SKETCH NORTH	DEG. MIN. SEC. ACTIVITY (✓) NEW WELL MODIFICATION/REPAIR Deepen Other (Specify) ✓ DESTROY (Describe Procedures and Materials Under "GEOLOGIC LOG" PLANNED USES (✓) WATER SUPPLY Domestic Public Industrial MONITORING TEST WELL CATHODIC PROTECTION HEAT EXCHANGE DIRECT PUSH
		SOUTH **Restrate or Describe Distance of Well from Roads, Buildings, Fences, Rivers, etc. and attach a map. Use additional paper if necessary. PLEASE BE ACCURATE & COMPLETE.	DIRECT PUSH INJECTION VAPOR EXTRACTION SPARGING REMEDIATION OTHER (SPECIFY)
		WATER LEVEL & YIELD OF COMPL DEPTH TO FIRST WATER (Ft.) BELOW SURFACE DEPTH OF STATIC WATER LEVEL 65.5 (Ft.) 8 DATE MEASURED	
TOTAL DEPTH OF TOTAL DEPTH OF	BORING 127.5 (Feet) COMPLETED WELL 127.5 (Feet)	TEST LENGTH (Hrs.) TOTAL DRAWDOWN May not be representative of a well's long-term yie.	(Fl.)

DI	EPT	н	ROPE					C	ASING (S)			DEPTH FROM SURFACE		ANNULAR MATERIAL					
FROM S	SUR	FACE	HOLE			E (1 377		X-3-007	33,000	S. A. S. Sansan					TYPE			
Ft.	to	Ft. (Inches)	- 20	100000	BLANK	SCREEN	CON	PUCTOR FILL PIPE	MATERIAL / GRADE	DIAMETER (Inches)	GAUGE OR WALL THICKNESS	SLOT SIZE IF ANY (Inches)	Ft.	to	Ft.	CE- MENT (✓)	BEN- TONITE	FILL	FILTER PACK (TYPE/SIZE)
()	20	20			1		STEEL	16	.250			0	20	1			none	
()	60	12	1	1			STEEL	12	.125		7							
60)	127.5	12		1			STEEL	12	.125	Mills Knife		1						
	T												Ť						
												<i>3</i> -				L-J			

_	ATTACHMENTS	(1
	Garlagia Lan	

DWR 188 REV 11-97

- Well Construction Diagram
- Geophysical Log(s)
- Soil/Water Chemical Analysis ✓ Other map and photo

ATTACH ADDITIONAL	INFORMATION	IF IT EXISTS
THE PROPERTY OF THE PARTY OF TH	man Continuent Cont.	a Dao.

		_		_	
CERTI	FICA	TION	STA	TEN	TENT

I, the undersigned, certify that this report is complete and accurate to the best of my knowledge and belief.

NAME___J. & H. Drilling Co., Inc.

(PERSON, FIRM, OR CORPORATION) (TYPED OR PRINTED)

1014 E. South St.

Anaheim

BEINUL HOIGH , PET, RAD

Anaheim CITY 10/27/05 DATE SIGNED CA 92805-5348 STATE 740854 C-57 LICENSE NUMBER

IF ADDITIONAL SPACE IS NEEDED, USE NEXT CONSECUTIVELY NUMBERED FORM

Attachment 4 Photographs

Destruction of three idle production wells (W-1-1, W-1-2, and W-1-5)



Photo 1: Preparing Well W-1-1 for abandonment. Pump and piping removed from well, casing extension to capture displaced water installed, and tremmie pipe lowered into well to pump in grout.



Photo 2: Well abandonment process at Well W-1-1



Photo 3: Well W-1-1 after abandonment completion



Photo 4: Well W-1-2 being abandoned by pressure grouting. Well is fitted with a pressure cap and grout is pumped under pressure into well casing and annular space.



Photo 5: Well W-1-2 being abandoned by pressure grouting. Excessive SKR burrows and surrounding soil type prevented vehicular access to the well location to abandon using tremmie pipe.



Photo 6: Grout pressure maintained after pumping Well W-1-2 casing and annular space full of grout



Photo 7: Well W-1-2 after completion of well abandonment.



Photo 8: Preparation of Well W-1-5 for abandonment: Fitment of casing extension to capture displaced water during grout filling.



Photo 9: Preparation of Well W-1-5 for abandonment: Placement of tremmie pipe in well to pump in sealing grout.



Photo 10: Well W-1-5 abandonment process proceeding.



Photo 11: Well W-1-5 after completion of well abandonment.