

## DEPARTMENT OF WATER RESOURCES

**NORTHERN REGION**

2440 Main Street  
 Red Bluff, CA 96080  
 (530) 529-7300  
 (530) 529-7322 (Fax)  
 NRO\_WCR@water.ca.gov

**NORTH CENTRAL REGION**

3500 Industrial Blvd.  
 West Sacramento, CA 95691  
 (916) 820-8232  
 (916) 376-9676 (Fax)  
 NCRO\_WCR@water.ca.gov

**SOUTH CENTRAL REGION**

691 N. Laverne Ave., Suite 104  
 Fresno, CA 93727  
 (559) 552-4450  
 (916) 744-5009 (Fax)  
 SCRO\_WCR@water.ca.gov

**SOUTHERN REGION**

770 Fairmont Avenue  
 Glendale, CA 91203  
 (818) 621-9529  
 (818) 254-4831  
 SRO\_WCR@water.ca.gov

**GENERAL PUBLIC WELL COMPLETION REPORT REQUEST FORM**

California Water Code Section 13752 allows for the release of copies of well completion reports to governmental agencies and to the public. This form is intended for requests from non-government entities. Please contact the appropriate DWR regional office for more details.

Type of Request:  Cannabis Cultivation Permit Application  Real Estate Agent Request  
 Consultant Request  Private Well Owner Request  
 General Public/Other \*If Other, Please Specify: \_\_\_\_\_

**For Each Property Request (Please Print):**

Well Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

APN: \_\_\_\_\_ County: \_\_\_\_\_

Driller: \_\_\_\_\_ Year Drilled: \_\_\_\_\_

Depth of Well: \_\_\_\_\_ Casing Diameter: \_\_\_\_\_

Owner at Time of Drilling: \_\_\_\_\_

Project Name (If Applicable): \_\_\_\_\_

Additional Information related to your search request (Maps, Coordinates, TRS, etc.):

**Requestor's Contact Information (Please print):**

Name: \_\_\_\_\_ Company: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

City: \_\_\_\_\_ Fax: \_\_\_\_\_

State: \_\_\_\_\_ Date: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Email: \_\_\_\_\_

FOR DWR USE ONLY

Date Received: \_\_\_\_\_

TRS: \_\_\_\_\_

Date Responded: \_\_\_\_\_

Initials: \_\_\_\_\_ Date: \_\_\_\_\_

Date Mailed: \_\_\_\_\_