REPORT OF ABNORMAL GROUNDWATER LEVELS

Butte County Department of Water & Resource Conservation
308 Nelson Avenue
Oroville, CA 95965
(530)538-4343

REPORTED BY: (Name)____________________________ TELEPHONE NUMBER________________

ADDRESS or P.O. Box No.:____________________ CITY:_________ STATE:_______ ZIP:_____

Well Location: Sec.______ Rng.______ Twp.________

Distance and direction to nearest road(s):________________________________________________________

Basin Management sub-area:______________________________________________________________

Depth to water:________ Date measured:________ Static Measurement: YES_ NO____

Depth of well:________ Size and type of casing:____________________________________________

Gallons per minute:________ Percentage of change in gallons per minute:____________________

Give a brief description of the problem:_________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

Signature:________________________ Date:________________________

7/22/2008