



Estrella-El Pomar-Creston Water District

Estrella-El Pomar-Creston GSA

P.O. Box 1499

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Paso Robles, CA 93447

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APPLICATION FOR CONSISTENCY DETERMINATION REPLACEMENT WELL EXECUTIVE ORDER N-7-22

Pursuant to Executive Order N-7-22, the EPC Groundwater Sustainability Agency (the "GSA"), one of the groundwater sustainability agencies implementing the Sustainable Groundwater Management Act (SGMA) within the Paso Robles Subbasin, provides the following acknowledgment, which if executed by a well applicant, would enable the GSA to conclude that groundwater extraction by the well to be permitted would not be inconsistent with the Groundwater Sustainability Plan for the Paso Robles Subbasin (GSP) as to the portion of the Subbasin within the GSA's jurisdiction.

ACKNOWLEDGMENTS

I, the owner of the property on which the well will be constructed (the "Applicant"), make the following acknowledgements:

_____ that SGMA requires the GSA to manage groundwater in a portion of the Paso Robles Subbasin and that the GSA is the agency with groundwater management authority over the land subject to Application # _____ (the "Application").

_____ that the GSA has the authority to limit extractions within its jurisdiction, including extractions from any well permitted pursuant to the Application.

_____ that a well permit issued by the County does not guarantee the extraction of any specific amount of water now or in the future.

_____ that the GSA's finding that the extraction well permit would not be inconsistent with the GSP does not guarantee the extraction of any specific amount of groundwater now or in the future.

_____ that the GSP includes specific groundwater requirements through minimum thresholds and measurable objectives and that any groundwater use will comply with these requirements.

_____ that the GSA makes no guarantees, representations, or warranties regarding the maintenance of any defined water level or water quality requirements in the Paso Robles Subbasin.

_____ that if the well that is the subject of the Application is a replacement well, the information provided on the Replacement Well Addendum (attached) is true and correct and will be relied upon by the GSA in considering whether to approve this Consistency Determination.

_____ that the GSA may require additional information before a determination can be made.

_____ that the Applicant will provide a copy of the Applicant's Permit Application made to the County and any other documents that are part of the Applicant's submission to the County, including "Interference" reports if they exist.

_____ that the GSA is not responsible to compensate Applicant, or is otherwise liable to Applicant, for any costs, investments or payments related to any groundwater well permitted pursuant to the Application, including pumping fees, extraction limits, costs related to well failure, well deepening, increased maintenance, replacement, or operational costs.

By signing below, Applicant, for himself/herself/itself, and any of Applicant's successors and assigns, agrees to hold the GSA harmless and indemnify the GSA from and against any liability arising from or related to the Acknowledgements contained herein, or the County issuing a well permit, or not, in response to the Application.

By acknowledging and initialing the above provisions, Applicant understands that the above Acknowledgements, and if applicable, the information and further Acknowledgements contained in the Replacement Well Addendum, will be incorporated into the terms and conditions of any well permit issued pursuant to the Application, whether or not specifically recited in the well permit issued by the County.

Signature of Applicant

Date

Name of Applicant (Landowner)

email address

APN Number

phone number

Property Address

County Well Permit Application # _____

APPROVED: _____

DENIED: _____

BY THE GSA this ____ DAY of _____, 202 ____.

By: _____

Name: _____

Its: _____

REPLACEMENT WELL ADDENDUM

Details of Existing Well

Average Annual Production for the Prior Three (3) Years: _____

Diameter Well Casing: _____

Depth: _____

Existing well, common name, e.g. "Well #3", "NE Corner", "Shop Well": _____

State and/or County well # or ID, if known _____

For example: "26S/12E-14H01", "25S12E05R001M", "AGL020004xxx-AG WELL"

Details of Replacement Well

Diameter Well Casing: _____

Depth: _____

Proximity to existing well (in feet): _____

In addition to the Acknowledgements set forth above, Applicant acknowledges:

_____ that the existing well will cease production prior to commencement of operation of the new well, and that the existing well will be decommissioned in the manner required by all applicable laws, rules, and regulations.

_____ that extractions from the new well will not materially exceed the average annual production of the existing well noted above.