

INDIAN WELLS VALLEY GROUNDWATER AUTHORITY (IWVGA)

REPORT FORM

FOR A SHALLOW WATER SUPPLY WELL NEGATIVELY IMPACTED BY CHRONIC OVERDRAFTING OF GROUNDWATER IN THE IWV BASIN

EMERGENCY ASSISTANCE

(MARCH 9, 2022)

The IWVGA has approved the first phase of the "Shallow Well (Impacts) Mitigation Program", Project No. 4 of the Authority's Groundwater Sustainability Plan (GSP), January 2020. Phase one includes development of the "Program" and initial "Outreach, Identification and Evaluation."

This "Emergency Assistance Report Form" is part of the "Outreach, Identification and Evaluation" for potentially negatively impacted shallow wells, occurring "after February 1, 2020", per the GSP. This Emergency Assistance program is for Shallow Wells experiencing an "emergency water supply" situation where the Well failure has occurred and no other potable water supply is available.

The subject Well must be fully registered with the Authority and the Well Owner must demonstrate reasonable and prudent well maintenance and repair.

In accordance with the GSP, the evaluation process for Emergency Assistance will include but not be limited to, an analysis of the following: (Note: (WO) indicates Well Owner responsibility and (GA) indicates Groundwater Authority responsibility.)

a) "Well Owner, Well and Well Hardware Identification and Description" (WO) Identification of the well owner, well location, well pump hardware and well pumping

history. Well depth as drilled and casing and screen lengths installed? Depth of the pump intake as last installed? Depth to top of Screen, any unusual formation materials noted in the driller's log, at the depth of the screen installation? Is this well declared to be de minimis? (Well registration with the GA.)

- **b)** "Nature of the Subject Well Failure" (WO) What is the nature of the well failure? Is the well failure a pumping failure or of a water quality nature? Indicate if you are currently "without" potable water supply, and explain "when" and "how" this occurred.
- **c)** "Emergency Assistance" Describe the Emergency Assistance you are requesting, including for "how long" and the "estimated cost".
- **d)** "Shallow Well Owner Impact Mitigation" Describe the work you have done to mitigate your Well failure and to "restore" potable water supply.
- **e)** "Shallow Well Impacts Mitigation" Describe your plan to mitigate your shallow well failure. Indicate whether you intend to submit a Report Form under the primary Shallow Well Impact, Identification and Mitigation Policy (primarily a technical support and well owner "cost reimbursement" program).

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