## **Appendix F Fresno County Well Documents**





## FRESNO COUNTY DEPARTMENT OF PUBLIC HEALTH ENVIRONMENTAL HEALTH DIVISION

P.O. Box 11867, Fresno, California 93775 Tel: (559) 600-3357 FAX: (559) 600-3379 Website: www.fcdph.org

#### REQUIREMENTS FOR MAINTAINING AN INACTIVE WATER WELL

An inactive water well is considered "abandoned" if it has not been used for a period of one year and must be destroyed by a licensed C-57 water well contractor unless the owner demonstrates intention to use the well again. In accordance with Section 115700 of the California Health and Safety Code, the well owner shall properly maintain an inactive well as evidence of intention for future use in such a way that the following requirements are met:

- 1. The well shall not impair the quality of water in the well and groundwater encountered by the well.
- 2. The top of the well or well casing will be provided with a cover, that is secured by a lock or by other means to prevent its removal without the aid of equipment or tools, to prevent unauthorized access, to prevent a safety hazard to humans and animals, and to prevent illegal disposal of wastes in the well.
  - The cover will be watertight where the top of the well casing or other surface openings to the well are below ground level, such as in a vault or below known levels of flooding. The cover will be watertight if the well is inactive for more than five consecutive years. A pump motor, angle drive, or other surface feature of a well, when in compliance with the above provisions, shall suffice as a cover.
- 3. The well will be marked so as to be easily visible and located, and labeled so as to be easily identified as a well.
- 4. The area surrounding the well will be kept clear of brush, debris, and waste materials.



## FRESNO COUNTY DEPARTMENT OF PUBLIC HEALTH ENVIRONMENTAL HEALTH DIVISION

P.O. Box 11867, Fresno, California 93775 Tel: (559) 600-3357 FAX: (559) 600-7629

#### WELL DESTRUCTION REQUIREMENTS

References: California Well Standards Ordinance [WSO]

(including DWR Water Well Standards Bulletin 74-81

and 74-90, and subsequent revisions)

http://wwwdpla.water.ca.gov/sd/groundwater/california well standards/

well\_standards\_content.html
California Water Code [WC]

<u>ONLY</u> persons who possess an active C-57 Water Well Contractors License may perform well destructions. [WC Section 13750.5; WSO Section 2.4.3] Well destruction performed as an "incidental part" of a larger job by a contractor not possessing a C-57 license is <u>not</u> allowed.

No person shall destroy any well without first applying for and receiving a **Permit** issued by the Fresno County Department of Public Health. [WSO Section 2.1.1] All available well construction data shall be submitted with the application for a well destruction permit.

All well destructions shall be performed according to Part III, Sections 20-23, Bulletin 74-81 and 74-90 [WSO Section 3].

- A hole shall be excavated around the well casing to a depth of 5 feet below the ground surface and the well casing removed to the bottom of the excavation (a variance to not excavate the casing may be requested for special circumstances).
- 2. The sealing material used for the upper portion of the well shall be allowed to spill over the casing into the excavation to form a cap.
- 3. After the well has been properly filled, including sufficient time for the sealing material in the excavation to set, the excavation shall be filled with native soil.
- 4. A State of California Well Completion Report ("Well Log") shall be submitted to the Fresno County Department of Public Health within 30 days of the completion of any well destruction. [WC Section 13751; WSO Section 7.1].

Materials used for sealing and fill materials are as follows:

- 1. Impervious Sealing Materials. Approved imperious materials include neat cement, sand-cement grout, concrete, and betonite clay.
- 2. Filler Material. These include clay, silt, sand, gravel, crushed stone and clean native soils.



### **DEPARTMENT OF PUBLIC HEALTH - ENVIRONMENTAL HEALTH DIVISION**

P.O. Box 11867 Zip 93775, 1221 Fulton Street, Fresno, California 93721
Telephone: (559) 600-3357 Fax: (559) 600-7629 Website: www.fcdph.org/water
PERMIT TO CONSTRUCT, DEEPEN, DESTROY, RECONDITION, OR REPAIR A WELL

| Application Date  |                                     |                    |   | OFFICE USE ONLY                                      |                               |  |  |       |  |  |  |  |  |
|---|-------------------------------------|--------------------|---|--|-------------------------------|--|--|-------|--|--|--|--|--|
| FA# Corroran Clay Depth   Seal Requirements on attachment   Fit   Seal Requirements on attachment   Fit   Seal Requirements on attachment   Fit   Seal Requirements on attachment   Seal Requirements on attachm    | Application Date Es                 | timated Start Date | Well Permit #                                       |  |                               |  |  |       |  |  |  |  |  |
| APN   Corroran Clay Depth   Ft   Corroran Clay Depth   Ft   Corroran Clay Annular Seal Requirements on attachment   Toncorran Clay Mell   Casterd Caring Above Nown Note of these Frobe Elevation Certificate required to be submitted to the Freeno Co. Public Works. Dept. prior to approval of the well electrical permit.)  Approved   |                                     | e                  |   |  |                               |  |  |       |  |  |  |  |  |
| Contractor   Con    |                                     |                    |   |  |                               | <u> </u>                                       |  |       |  |  |  |  |  |
| Contractor     Cather Cacinal above toward tool and if pool Elevation Certificate required to be submitted to the France Ca. Public Works. Dept. prior to approval of the well electrical permit.)  | APN                                 |                    |   |  | Seal Require                  | ments on attachmer                             |  | . •   |  |  |  |  |  |
| License #   |                                     |                    | ☐ Well Location in                                  | r Flood 2  | <u>Zone</u>                   |  |  |       |  |  |  |  |  |
| Phone   |                                     |                    | (Extend Casing above known the Fresno Co. Public Wo | own flood le<br>rks. Dept. p                         | vel; Flood E<br>rior to appro | levation Certificate<br>oval of the well elect | equired to be submitte<br>rical permit.) | ed to |  |  |  |  |  |
| Final Insp.   Date   Supervisor   | License #                           | <del></del>        | Annroyed  | Da   | ,                             |  |  |       |  |  |  |  |  |
| Dower Name  | Phone                               |                    |   |  |                               |  | p Date                                   |       |  |  |  |  |  |
| Owner Name  | FAX                                 |                    | Final Insp  | Da   | ate                           | Super  | visor                                    |       |  |  |  |  |  |
| Owner Name  |                                     |                    |   |  |                               |  |  |       |  |  |  |  |  |
| City   State   Zip  | Job Address/Location                |                    |   |  |                               | _ Parcel Size _                                |  |       |  |  |  |  |  |
| Type of Work   New Well   Casing Driven   Casing Driven   Domestic Private   Well Casing Material   Mell Casing     | Owner Name                          | <del></del>        |   |  |                               | _ Owner Phone                                  |  |       |  |  |  |  |  |
| New Well  | Owner Address                       |                    | Cit   | у  |                               | State  | Zip                                      |       |  |  |  |  |  |
| Gable Tool   Domestic Public   Gale Gool   Gale Tool    |                                     |                    |   |  | Well Con                      | struction                                      |  |       |  |  |  |  |  |
| Reconstruction/Deepening   Hardrock   Agricultural   Agricultural   Conductor Casing Gauge   Conductor Casing Material   Conductor Casing Diameter   Figure   Conductor Casing Diameter   Figure   Conductor Casing Diameter   Figure    |                                     |                    |   |  | Well Casi                     | ng Material                                    |  | _     |  |  |  |  |  |
| Auger     Industrial   Conductor Casing Material   Conductor Casing Material   Conductor Casing Diameter   Ft   Monitoring   Soil-Boring   Conductor Casing Depth   Ft   Annular Seal Depth   Ft   Borehole Diameter   In   Ft   Despit to Water   Ft   Seal Depth   Ft   Betholic Chips - Product Name   Depth to Water   Ft   Seal Depth   Ft   Bethonite Chips - Product Name   Depth to Water   Ft   Seal Depth   Ft   Bethonite Chips - Product Name   Depth to Water   Ft   Bethonite Chips - Product Name   Depth to Water   Ft   Bethonite Chips - Product Name   Depth to Water   Ft   Bethonite Chips - Product Name   Depth to Water   Ft   Designated University of Price Fall (allowed only when the interval to be sealed is dry and less than 30 Ft depth)   Well Destruction   Setbacks   All setbacks exceed 300 Feet   Other Wells   Ft   Designated Sewage Replacement Area   Ft   Ft   Designated Sewage Replacement Area   Ft   Ft   Several Peach Chips - Product Name   Ft   Designated Sewage Replacement Area   Ft   Ft   Ft   Designated Sewage Replacement Area   Ft   Ft   Ft   Ft   Designated Sewage Replacement Area   Ft   Ft   Ft   Ft   Ft   Ft   Ft   F  |                                     |                    |   | olic   |                               |  | I  | n     |  |  |  |  |  |
| Destruction   Direct Rotary   Cathodic   Conductor Casing Diameter   Conductor Casing Diameter   Ft   Annular Seal Depth   Ft   Gravel Pack   Yes   No   No   No   No   No   No   Casing Casing Depth   The Well Diameter   In   Total Depth   Ft   Seal Depth   Ft   Depth to Water   Ft   Seal Depth   Ft   Bentonite Chips - Product Name   Depth   Depth to Water   Ft   Seal Depth   Ft   Designated July and less than 30 Ft depth   Seal Depth   Seal Depth   Seal Depth   Ft   Designated July and less than 30 Ft depth   Seal Depth  |                                     |                    |   |  |                               |  |  | _     |  |  |  |  |  |
| Reverse Rotary   Test Hole   Conductor Casing Depth   Ft   Annual Zeas Depth   Soil-Boring   Collection   Reverse Rotary   Conductor Casing Depth   Ft   Borehole Diameter   In   Gravel Pack   Ves   No   Reverse Rotary   Reverse Rotary   Conductor Casing Depth   Ft   Borehole Diameter   In   Total Depth   Ft   Seal Depth   Ft   Reverse Rotary   Reverse Reverse Rotary   Reverse Rotary   Reverse Reve    |                                     |                    |   |  |                               |  |  | _     |  |  |  |  |  |
| Soil-Boring   Soil-Boring   Sorehole Diameter   In Sociation   Diameter   In Sociation   Diameter   In Total Depth   Ft   Seal Pape   Ft   Se    | _                                   |                    | Test Hole   |  | Conducto                      | r Casing Depth                                 | •  | Ft    |  |  |  |  |  |
| Other   Gravel Pack   Yes   No   Well Destruction   Uncased   Other   Sealing Material/Seal Placement Method   Well Diameter   In Total Depth   Ft   Seal Depth   Ft   Bentonite Chips - Product Name   Depth to Water   Ft   Seal Depth   Ft   Bentonite Chips - Product Name   Depth to Water   Ft   Seal Depth   Ft   Bentonite Chips - Product Name   Depth to Water   Ft   Below Grade (6ft max allowed)   Oil lubricated pump (Anny oil in the well shall be removed and properly disposed of prior to destruction)    Setbacks   All setbacks exceed 300 Feet   Other Wells   Ft   Designated Sewage Replacement Area   Ft   Seepage Pits   Ft   Sewer Lines   Ft   Animal/Fowl Enclosure   Ft   Designated Sewage Replacement Area   Ft   Ft   Seepage (Nontroing Well/Soil Boring PE4653)   PAYMENT METHOD   Cash   Credit Card (Online Payment Receipt Attached)   Thereby certify that the information described herein is correct. I understand that all work is to be done in accordance with the California Well Standards Ordinance and the conditions of this permit application, including any conditions which are added by the Environmental Health Division upon review of this application and issuance of the permit. I certify that have a current C-57 Contractor's License and, if lemploy workers, a current certificate of Workers' Compensation Insurance. I further understand that any permit issued pursuant to this application is subject to such further conditions as may be deemed necessary to ensure compliance with the Ordinance. Note: This permit is non-transferable and is valid for 180 days.    CONTRACTOR SIGNATURE:   |                                     |                    |   |  |                               |  |  | Ft    |  |  |  |  |  |
| Well Destruction  |                                     |                    |   |  |                               |  |  | in    |  |  |  |  |  |
| Sealing Material/Seal Placement Method   Well Diameter   In Total Depth   Ft   Seal Depth   Ft   Seal Depth   Ft   Below Grade (6ft max allowed)   Dil Iubricated pump (Any oil in the well shall be removed and properly disposed of prior to destruction)   The Seeber Lines   Ft   Septic Tank   Ft   Designated Sewage Replacement Area   Ft   Seeber Lines   Ft   Animal/Fowl Enclosure   Ft   Designated Sewage Replacement Area   Ft   Ft   Gesting Control Basins   Ft   Maste Water Disposal Ponds   Ft   Lakes/Streams   Ft   Ft   Ft   Gesting Control Basins   Ft   Waste Water Disposal Ponds   Ft   Lakes/Streams   Ft   Ft   Ft   Ft   Ft   Ft   Ft   F  | Well Destruction                    |                    |   |  | Glaveira                      | ick   Tes   INC                                |  |       |  |  |  |  |  |
| Depth to Water Ft Seal Depth Ft Below Grade (6ft max allowed)    Casing Perforated Ft to Ft Pt Below Grade (6ft max allowed)   The Seal Depth Seal Depth Seal Depth Seal Depth Seal Seal Depth S  | ·                                   | Bottom Uncased     | ☐ Other   | Sealing  | Material/                     | Seal Placement I                               | <u>Method</u>                            |       |  |  |  |  |  |
| Depth to Water Ft Seal Depth Ft Pt to Ft Pt Designated Free Fall (allowed only when the interval to be sealed is dry and less than 30 Ft depth)    Pumped   Free Fall (allowed only when the interval to be sealed is dry and less than 30 Ft depth)    Pumped   Free Fall (allowed only when the interval to be sealed is dry and less than 30 Ft depth)    Designated pumped   Free Fall (allowed only when the interval to be sealed is dry and less than 30 Ft depth)    Designated Sewage Replacement Area Ft Sewer Lines Ft Animal/Fowl Enclosure Ft Designated Sewage Replacement Area Ft Designated Sewage Replacement Area Ft Sewer Lines Ft Waste Water Disposal Ponds Ft Lakes/Streams Ft Lakes/Streams Ft Septic Mount of Sets (Agricultural/Cathodic/Test Hole PE4650, Public/Industrial PE4652) \$441 (Well Destruction PE4651)    No Charge (Monitoring Well/Soil Boring PE4653)   PAYMENT METHOD Cash Check Credit Card (Online Payment Receipt Attached)    Thereby certify that the information described herein is correct. I understand that all work is to be done in accordance with the California Well Standards Ordinance and the conditions of this permit. I certify that I have a current C-57 contractor's License and, if I employ workers, a current certificate of Workers' Compensation Insurance. I further understand that any permit issued pursuant to this application in subject to such further conditions as may be deemed necessary to ensure compliance with the Ordinance. Note: This permit is non-transferable and is valid for 180 days.    OFFICE USE ONLY - ENVISION CLERICAL: Account# Invoice# Invoice# Invoice# Invoice# Invoice# Invoice# Invoice# Invoice# Invoice# Invoice Head of the Property of the Invoice Head of the Property of The Product Name Property of the Environmental Health Division upon review of Workers' Compensation Insurance of the permit. I certify that I have a current C-57 Contractor's License and, if I employ workers, a current C-57 C | Well Diameter In                    | Total Depth        | Ft  | ☐ Neat Cement ☐ 11 Sack Sand Cement ☐ Concrete       |                               |  |  |       |  |  |  |  |  |
| Casing PerforatedFt toFt Below Grade (6ft max allowed)  |                                     | · ·                |   | ☐ Bentonite Chips – Product Name                     |                               |  |  |       |  |  |  |  |  |
| Casing cut off  | Casing Perforated Ft t              | to Ft              |   | ☐ Pumped ☐ Free Fall (allowed only when the interval |                               |  |  |       |  |  |  |  |  |
| Gil lubricated pump (Any oil in the well shall be removed and property disposed of prior to destruction)  |                                     |                    |   | ļ  |                               |  |  |       |  |  |  |  |  |
| Setbacks   All setbacks exceed 300 Feet   Other Wells   |                                     |                    | emoved and properly                                 | 10 00 3  | caica is a                    | y and iess man                                 | <u>oo i t deptiij</u>                    |       |  |  |  |  |  |
| Leach Lines Ft Septic Tank Ft Cesspool Ft Septic Tank Ft Seepage Pits Seepage Pits Ft Seepage Pits Seepage Pit  |                                     |                    |   |  |                               |  |  |       |  |  |  |  |  |
| Sewer Lines   |                                     |                    |   |  |                               | _  |  |       |  |  |  |  |  |
| Flood Control BasinsFt  |                                     | · ·                | · · · · · · · · · · · · · · · · · · ·               |  |                               |  |  |       |  |  |  |  |  |
| Second   S    |                                     |                    | -   |  |                               |  |  |       |  |  |  |  |  |
| No Charge (Monitoring Well/Soil Boring PE4653)   PAYMENT METHOD   Cash   Check   Credit Card (Online Payment Receipt Attached)   I hereby certify that the information described herein is correct. I understand that all work is to be done in accordance with the California Well Standards Ordinance and the conditions of this permit application, including any conditions which are added by the Environmental Health Division upon review of this application and issuance of the permit. I certify that I have a current C-57 Contractor's License and, if I employ workers, a current certificate of Workers' Compensation Insurance. I further understand that any permit issued pursuant to this application is subject to such further conditions as may be deemed necessary to ensure compliance with the Ordinance. Note: This permit is non-transferable and is valid for 180 days.  CONTRACTOR SIGNATURE:    DATE:  |                                     |                    |   |  |                               |  |  |       |  |  |  |  |  |
| PAYMENT METHOD  |                                     |                    | Hole <b>PE4650</b> , Public/Indu                    | strial <b>PE46</b>                                   | 652) 🗌 \$                     | 441 (Well Destruc                              | etion <b>PE4651</b> )                    |       |  |  |  |  |  |
| Ordinance and the conditions of this permit application, including any conditions which are added by the Environmental Health Division upon review of this application and issuance of the permit. I certify that I have a current C-57 Contractor's License and, if I employ workers, a current certificate of Workers' Compensation Insurance. I further understand that any permit issued pursuant to this application is subject to such further conditions as may be deemed necessary to ensure compliance with the Ordinance. Note: This permit is non-transferable and is valid for 180 days.  CONTRACTOR SIGNATURE:  DATE:  OFFICE USE ONLY - ENVISION CLERICAL:  Account# Invoice# Entered By Date   |                                     |                    | Card (Online Payment R                              | eceipt Atta  | ached)                        |  |  |       |  |  |  |  |  |
| this application and issuance of the permit. I certify that I have a current C-57 Contractor's License and, if I employ workers, a current certificate of Workers' Compensation Insurance. I further understand that any permit issued pursuant to this application is subject to such further conditions as may be deemed necessary to ensure compliance with the Ordinance. Note: This permit is non-transferable and is valid for 180 days.  CONTRACTOR SIGNATURE:  DATE:  OFFICE USE ONLY - ENVISION CLERICAL:  Account# Invoice# Entered By Date   |                                     |                    |   |  |                               |  |  |       |  |  |  |  |  |
| Workers' Compensation Insurance. I further understand that any permit issued pursuant to this application is subject to such further conditions as may be deemed necessary to ensure compliance with the Ordinance. Note: This permit is non-transferable and is valid for 180 days.  CONTRACTOR SIGNATURE:  DATE:  OFFICE USE ONLY - ENVISION CLERICAL:  Account# Invoice# Entered By Date   |                                     |                    |   |  |                               |  |  |       |  |  |  |  |  |
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# DEPARTMENT OF PUBLIC HEALTH - ENVIRONMENTAL HEALTH DIVISION P.O. Box 11867 Zip 93775, 1221 Fulton Street, Fresno, California 93721 Telephone: (559) 600-3357 Fax: (559) 600-7629 Website: www.fcdph.org/water PLOT PLANTO ACCOMPANY PERMIT TO CONSTRUCT, DEEPEN, DESTROY,

Job Address / Location: \_\_\_\_\_\_APN: \_\_\_\_\_ / \_ / \_ PERMIT # \_\_\_\_\_

RECONDITION, OR REPAIR A WELL

Note: This permit is non-transferable and is valid for 180 days

| Indicate distances in feet. Provide the names of streets or roads nearest to the property. Provide dimensions of the property and all existing or proposed structures. Provide locations of existing or proposed sewage disposal systems, including expansion or repair areas, within 250 feet of the new well. Provide locations of all other wells within 300 feet of the new well. Location information shall include all adjacent parcels, if within setbacks. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |
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