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Notice of Exemption

Form D

To: Office of Planning and Research
P.O. Box 3044, Room 212
Sacramento, CA 95812-3044

County Clerk
County of _____

_____

_____

From: (Public Agency) Department of Water Resources
Division of Operations and Maintenance
715 P Street, Sacramento CA 95814
(Address)

Project Title: SJFD California Aqueduct Canal Liner Repairs and Rehabilitation: 271.27L and MP 274.04R/L

Project Location - Specific:

Coordinates:
MP 271.27 at Lat: 35°3'54"N, Long: 119°6'50"W.
MP 274.04 at Lat: 35°2'50"N, Long: 119°4'20"W

Project Location – City: _____ Project Location – County: Kern

Description of Nature, Purpose and Beneficiaries of Project:

DWR will work with a Contractor to perform repairs to the California Aqueduct. Work will include repairing concrete liner by filling voids on the water side of the embankment. Damaged panels will be craned to roadway for offsite disposal. Grouting will include injecting high-pressure grout fed by a pump truck. New panels will be formed and poured onsite. Staging and access will be along existing roadways and turnouts. All work will be within DWR right-of-way.

Name of Public Agency Approving Project: Department of Water Resources

Name of Person or Agency Carrying Out Project: Department of Water Resources

Exempt Status: **(check one)**

- ☐ Ministerial (Sec. 21080(b)(1); 15268);
- ☐ Declared Emergency (Sec. 21080(b)(3); 15269(a));
- ☐ Emergency Project (Sec. 21080(b)(4); 15269(b)(c));
- ☒ Categorical Exemption. State type and section number: Class 1, Existing Facilities, Section No. 15301
- ☐ Statutory Exemptions. State code number: _____

Reasons why project is exempt:

The State Water Project provides significant and important services to many Californians. This project is exempt because it involves routine maintenance activities. This project will not result in impacts to special status species or habitat. The Categorical Exemption Class 1 will be used for CEQA compliance as this activity will be implemented without environmental impacts.

Lead Agency Contact Person: Sara Lowry Area Code/Telephone/Extension: (916) 902-7709

If filed by applicant:

1. Attach certified document of exemption finding.
2. Has a Notice of Exemption been filed by the public agency approving the project? ☐ Yes ☐ No

Signature: Sara Lowry Date: 10/21/2025 Title: Manager, Environmental Regulatory Compliance Section

☒ Signed by Lead Agency
☐ Signed by Applicant

Date received for filing at OPR: _____

Revised 2005