

STATE OF NEVADA  
DIVISION OF WATER RESOURCES  
WELL DRILLER'S REPORT

OFFICE USE ONLY  
Log No. 105539  
Permit No. \_\_\_\_\_  
Basin 102

PRINT OR TYPE ONLY  
DO NOT WRITE ON BACK

Please complete this form in its entirety in  
accordance with NRS 534.170 and NAC 534.340

N39.333411  
W 119.244192 NAD27  
NOTICE OF INTENT NO. 61017

1. OWNER CORNER STONE CONSTRUCTION ADDRESS AT WELL LOCATION 7900 BEECH ST  
MAILING ADDRESS 3140 E. NYE LANE SILVER SPRINGS, NV  
CARSON CITY, NV 89706 Subdivision Name: \_\_\_\_\_ County: Lyon

2. LOCATION SW 1/4 Sec 13 T 17N N/S R 24 E Latitude 39.33331°N UTM E  NAD 27  
PERMIT/WAIVER No. SE SW 17-562-11 Longitude 119.24518°W N  NAD 83/WGS 84

Parcel No. \_\_\_\_\_

3. WORKED PERFORMED  
 New Well  Replace  Recondition  
 Deepen  Other

4. PROPOSED USE  
 Domestic  Irrigation  Test  
 Municipal/Industrial  Monitor  Stock

5. WELL TYPE  
 Cable  Rotary  RVC  
 Air  Other MUD

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
OVERBURDEN		0	3	3
COBBLES AND SMALL GRAVELS		3	45	42
VOLCANIC GRAVELS		45	163	118
BROWN GARD CLAY		163	194	31
VOLCANIC CLAY		194	216	22
FRACTURED VOLCANIC GRAVELS		216	300	84
VARY HARD VOLCANIC GRAVELS FRACTURED	XXX	300	360	60

9. WELL CONSTRUCTION

Depth Drilled 360' Feet Depth Cased 360' Feet

HOLE DIAMETER (BIT SIZE)

From	To
<u>10 5/8</u> Inches	<u>0</u> Feet <u>200</u> Feet
<u>8 3/4</u> Inches	<u>200</u> Feet <u>360</u> Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 5/8</u>	<u>13.03</u>	<u>.188</u>	<u>0</u>	<u>360</u>

Perforations:

Type of perforation FACTORY MILL SLOT

Size of perforation 3 X 3/32

From	to
<u>300</u> feet	<u>320</u> feet
<u>340</u> feet	<u>360</u> feet

Annular Seal:  Yes  No

Neat Cement to \_\_\_\_\_  Pumped  Poured

Cement Grout 0 to 55  Pumped  Poured

Concrete Grout to \_\_\_\_\_  Pumped  Poured

≥30% Bentonite Grout to \_\_\_\_\_  Pumped  Poured

Gravel Pack:  Yes  No 55 to 360  Pumped  Poured

Type: \_\_\_\_\_

Bentonite Chips:  Yes  No to \_\_\_\_\_  Pumped  Poured

Type: \_\_\_\_\_

Date started: 04-Dec 20 07  
Date completed: 04-Jan 20 08

7. Water Level  
Static water level: 220 feet below land surface  
Artesian Flow: \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
Water Temperature: COLD °F  
Quality: GOOD

8. WELL TEST DATA

TEST METHOD:  Bailor  Pump  Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>15+</u>	<u>45</u>	<u>3 HRS</u>

10. DRILLER'S CERTIFICATION

This well was drilled under my supervision and the report is true to the best of my knowledge.

Name CAPITAL CITY WELL DRILLING AND PUMP SERVICE INC.  
Contractor

Address # 20 KIT KAT DRIVE  
Contractor

CARSON CITY, NV 89706

Nevada contractor's license number \_\_\_\_\_  
issued by the State Contractor's Board 0055548

Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1905

Signed [Signature]  
By driller performing actual drilling on site or contractor

Date 01/18/2008