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

OFFICE USE ONLY
Log No. 107439
Permit No.
Basin 105

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

NOTICE OF INTENT NO. 63533

1. OWNER NICK KATSARIS
MAILING ADDRESS 2991 HOT SPRINGS RD
SE MINDEN NV 89423

ADDRESS AT WELL LOCATION 631 MEGAN CT
GARDNERVILLE NV 89410
Subdivision Name: County: Douglas

2. LOCATION ¼ SW ¼ Sec 19 T 12N N/S R 21 E
PERMIT/WAIVER No. 1221-19-002-024 (Issued by Water Resources) Parcel No.

Latitude 38.88159°N
Longitude 119.67301°W
UTM E N
☐ NAD 27 ☒ NAD 83/WGS 84

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	Thickness
OLD 10 5/8 WELL		0	320	320
BROWN CLAY		320	349	29
BROWN GUMMY CLAY		349	362	13
SMALL SILTY SANDS	X	362	386	24
FRACTURED GRAVELS	XXX	386	420	34

N38.881583
W119.672063 NAD27

Date started: 27-Oct, 20 08
Date completed: 04-Nov, 20 08

9. WELL CONSTRUCTION
Depth Drilled 420 ~~100~~ Feet Depth Cased 420 ~~100~~ Feet

HOLE DIAMETER (BIT SIZE)

		From	To
9 7/8	Inches	320 Feet	420 Feet
	Inches	Feet	Feet
	Inches	Feet	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	4.06	.316 ~~.246~~	300	420
SDR 21				

Perforations:
Type of perforation FACTORY MILL CUT
Size of perforation 0.032
From 360 feet to 380 feet
From 400 feet to 420 feet
From feet to feet
From feet to feet
From feet to feet

Annular Seal: ☐ Yes ☐ No
☐ Neat Cement N/A to ☐ Pumped ☐ Poured
☐ Cement Grout to ☐ Pumped ☐ Poured
☐ Concrete Grout to ☐ Pumped ☐ Poured
☐ ≥30% Bentonite Grout to ☐ Pumped ☐ Poured
Gravel Pack: ☐ Yes ☐ No N/A to ☐ Pumped ☐ Poured
Type:
Bentonite Chips: ☐ Yes ☐ No N/A to ☐ Pumped ☐ Poured
Type:

7. Water Level
Static water level: 240 feet below land surface
Artesian Flow: G.P.M. P.S.I.
Water Temperature: COLD °F
Quality: GOOD

8. WELL TEST DATA
TEST METHOD: ☐ Bailer ☐ Pump ☐ Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
30	80	3 HRS

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 (By driller performing actual drilling on site or contractor)
Date 11/28/2008

(Rev. 05-08)
USE ADDITIONAL SHEETS IF NECESSARY

RECEIVED
2008 DEC -3 AM 11:20
STATE ENGINEERS OFFICE