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

OFFICE USE ONLY
Log No. 108105
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

NOTICE OF INTENT NO. 63542

1. OWNER DARLYNN BRANTON
MAILING ADDRESS 5900 DAYTON AVE
SILVER SPRINGS , NV 89429

ADDRESS AT WELL LOCATION 5900 DAYTON AVE
SILVER SPRINGS, NV 89429
Subdivision Name: County: Lyon

2. LOCATION NW ¼ NW ¼ Sec 32 T 18 N/S R 24 E
PERMIT/WAIVER No. 018-451-15 Issued by Water Resources
Parcel No.

Latitude 39.38654*N
Longitude 119.32227*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
BROWN SANDY CLAY		345	381	36
COURSE VOLCANIC SANDS		381	400	19
LOOSE VOLCANIC SANDS	XXX	400	420	20
Deepening of log # 44109				
N39.386229				
W119.321271 NAD27				

Date started: 12-Feb , 20 09
Date completed: 17-Feb , 20 09

9. WELL CONSTRUCTION
Depth Drilled 420 ~~70~~ Feet Depth Cased 420 Feet

HOLE DIAMETER (BIT SIZE)

		From		To	
6 1/8	Inches	345	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)
5"	3.21	.216	345	420
SDR 21				

Perforations:
Type of perforation FACTORY SLOT
Size of perforation 0.032
From 380 feet to 420 feet
From feet to 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 to ☐ Pumped ☐ Poured
Type: N/A
Bentonite Chips: ☐ Yes ☐ No to ☐ Pumped ☐ Poured
Type: N/A

7. Water Level
Static water level: 300 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)
20	60	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 Michael Hack by driller performing actual drilling or his or contractor
Date 03/01/2009

(Rev. 05-08)

USE ADDITIONAL SHEETS IF NECESSARY