

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

OFFICE USE ONLY

Log No. 108429  
Permit No. \_\_\_\_\_  
Basin 106

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. 64592

1. OWNER JOHN VOLK  
MAILING ADDRESS P.O. BOX 94  
CARSON CITY, NV 897022

ADDRESS AT WELL LOCATION NOT GIVEN YET- EASTSIDE LANE  
TOPAZ, NV  
Subdivision Name: \_\_\_\_\_ County: Douglas

2. LOCATION SW 1/4 NE 1/4 Sec 16 T 09N N/S R 23 E  
PERMIT/WAIVER No. NW 20 923-20-001-005  
Issued by Water Resources Parcel No. \_\_\_\_\_

Latitude 38.62832°N UTM E  NAD 27  
Longitude 119.44050°W N  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	Thick-ness
VOLCANIC GRAVELS AND COBBLES		0	48	48
BROWN CLAY		48	159	111
VOLCANIC SANDS		159	253	94
HARD SLATE		253	305	52
FRACTURED VOLCANIC GRAVELS RUSTY COLOR SOFT AREAS	X	305	360	55
HARD VOLCANIC SLATE		360	400	40
SOFT AREAS DIFFERENT COLOR CHANGES FRACTURED AREAS	X	400	440	40
<u>38.6284110°N</u>				
<u>119.439502°W</u>				
<u>NAD 27</u>				

9. WELL CONSTRUCTION			
Depth Drilled	Feet	Depth Cased	Feet
440		440	

HOLE DIAMETER (BIT SIZE)			
	From	To	
10 5/8 inches	0	360	Feet
6 1/8 inches	360	440	Feet

CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	13.03	.188	0	360
5	3.82	.216	340	440

Perforations: FACTORY MILL SLOT  
Size of perforation 3 X 3/32  
From 320 feet to 360 feet  
From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Annular Seal:  Yes  No

<input checked="" type="checkbox"/> Neat Cement	0 to 50	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
<input type="checkbox"/> Cement Grout	_____ to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> Concrete Grout	_____ to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> ≥30% Bentonite Grout	_____ to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured

Gravel Pack:  Yes  No 50 to 360  Pumped  Poured  
Type: \_\_\_\_\_  
Bentonite Chips:  Yes  No \_\_\_\_\_ to \_\_\_\_\_  Pumped  Poured  
Type: \_\_\_\_\_

Date started: 21-Jul 2009  
Date completed: 27-Jul 2009

7. Water Level  
Static water level: 225 feet below land surface  
Artesian Flow: \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
Water Temperature: WARM °F  
Quality: GOOD

8. WELL TEST DATA			
TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift			
	<u>7</u>	<u>160</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 210911013  
Division of Water Resources, the on-site driller 1905  
Signed Michael D. Hack  
By driller performing actual drilling on site or contractor  
Date 08/15/2009

USE ADDITIONAL SHEETS IF NECESSARY

210911013