

PLUGGED BY  
WSI # 45317

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



OFFICE USE ONLY  
Log No. 109828  
Permit No. 145  
Basin

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. 45321

1. OWNER **Minden Gardnerville Sanitation District**  
MAILING ADDRESS **1790 Hwy 395**  
**Minden, NV 89423**

ADDRESS AT WELL LOCATION **1790 Hwy 395**  
**Minden, Nv 89423**  
Subdivision Name: \_\_\_\_\_ County: **Douglas**

2. LOCATION NE 1/4 NW 1/4 Sec 30 T 13N N/S R 20 E  
PERMIT/WAIVER No. **DEW-75** **1320-30-101-001**  
Issued by Water Resources Parcel No.

Latitude **N 38 57.925** UTM E  NAD 27  
Longitude **W 119 46.826** N  NAD 83/WGS 84

3. WORKED PERFORMED  
 New Well  Replace  Recondition  
 Deepen  Other

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

5. WELL TYPE  
 Cable  Rotary  RVC  
 Air  Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Well # 6				
see Attached Boring Log				
38.965517 N				
119.779436 W				
NAD 27 (TW)				
*See Plugging Log # 109829				
2010 JUN - 4 PM 1:25				

9. WELL CONSTRUCTION

Depth Drilled	Feet	Depth Cased	Feet
30		30	

HOLE DIAMETER (BIT SIZE)

From	To
24 Inches	0 Feet 30 Feet
Inches	Feet Feet
Inches	Feet Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8	6	3/8	0	30

Perforations:

Type of perforation **machine slot**  
Size of perforation **0.032**

From **10** feet to **30** feet  
From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Annular Seal:  Yes  No

Neat Cement \_\_\_\_\_ to \_\_\_\_\_  Pumped  Poured  
 Cement Grout \_\_\_\_\_ to \_\_\_\_\_  Pumped  Poured  
 Concrete Grout \_\_\_\_\_ to \_\_\_\_\_  Pumped  Poured  
 ≥30% Bentonite Grout **10** to **12**  Pumped  Poured

Gravel Pack:  Yes  No **12** to **30**  Pumped  Poured  
Type: **3/8 Pea Gravel**

Bentonite Chips:  Yes  No **10** to **12**  Pumped  Poured  
Type: **3/8's**

Date started: **25-Jun**, 20 **08**  
Date completed: **25-Jun**, 20 **08**

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

8. WELL TEST DATA

TEST METHOD: <input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)

10. DRILLER'S CERTIFICATION  
This well was drilled under my supervision and the report is true to the best of my knowledge.  
Name **Viking Drillers Inc** Contractor  
Address **801 Northport Dr.** Contractor  
**West Sacramento, CA**  
Nevada contractor's license number **0034680**  
issued by the State Contractor's Board  
Nevada driller's license number issued by the **DEW-2361**  
Division of Water Resources, the on-site driller  
Signed \_\_\_\_\_  
By driller performing actual drilling on site or contractor  
Date **7/21/2008**