

PLUGGED BY
 WS # 45317

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



OFFICE USE ONLY
 Log No. 109832
 Permit No. 145 pglot2
 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 ADDRESS AT WELL LOCATION 1790 Hwy 395
 MAILING ADDRESS 1790 Hwy 395 Minden, NV 89423
Minden, NV 89423 Subdivision Name: _____ County: Douglas

2. LOCATION NE 1/4 NW 1/4 Sec 30 T 13N N 1/2 R 20 E Latitude N 38 57.919 UTM E NAD 27
 PERMIT/WAIVER No. DEW-75 1320-30-101-001 Longitude W 119 46.816 N NAD 83/WGS 84
Issued by Water Resources 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

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Well # 4				
see Attached Boring Log				
38.965417° N				
119.779276° W				
480 27 (FB)				
2010 JUN 24 + 1111 + 1111				

9. WELL CONSTRUCTION

Depth Drilled 30 Feet Depth Cased 30 Feet

HOLE DIAMETER (BIT SIZE)

From	To	Feet	Feet
<u>24</u> Inches	<u>0</u> Feet	<u>30</u> Feet	

CASING SCHEDULE

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

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: Bailor Pump 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
 issued by the State Contractor's Board 0034680

Nevada driller's license number issued by the
 Division of Water Resources, the on-site driller DEW-2361

Signed _____
 By driller performing actual drilling on site or contractor

Date: 7/21/2008

LOG# 109832
 pg 2 of 2

THIS BORING LOG IS FOR VIKING'S INTERNAL PURPOSES ONLY. IT DOES NOT REPRESENT INFORMATION PROVIDED BY A SOIL ENGINEER.

LOG FOR BORING NO. ④ 5.6		JOB NAME: K. G. WALTERS			
DATE STARTED 6/25/08	DATE COMPLETED 6/25/08	LOGGED BY EB	DRILLED BY EB	TYPE OF DRILL RIG # 31	JOB NO. 5918
DEPTH OF HOLE 40'	DIAMETER OF HOLE 24"	CASING 8"	PERFORATIONS 30'	SAMPLING METHOD	ELEVATION

LOCATION
 N 38 57.919 W 119 46.816

DRILLERS NOTES:

DEW-75

DEPTH	SAMPLES	GRAPHIC	DESCRIPTION
10'		▽	SILTY SAND
15'			SAND & gravel
20'			MED to COARSE SAND
30'			
40'			
50'			
60'			
70'			
80'			
90'			
100'			

STATE LICENSED SOIL ENGINEER
 PH 1:24
 2010 JAN -4