

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

**OFFICE USE ONLY**  
Log No. 113801  
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. **66187**

1. OWNER **ANDRE AND VICKI BEAUPRE**  
MAILING ADDRESS **775 SUTRO SPRINGS RD**  
**DAYTON, NV 89403**

ADDRESS AT WELL LOCATION **NOT GIVEN YET**  
**ANDREIAN VALLEY, NV 89429**  
Subdivision Name: \_\_\_\_\_ County: **Lyon**

2. LOCATION **NE 1/4 NW 1/4 Sec 22 T 16N N/S R 24 E**  
PERMIT/WAIVER No. **015-711-01**  
Issued by Water Resources Parcel No.

Latitude **39.24193°N** UTM E  NAD 27  
Longitude **119.28035°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
OVER BURDEN		0	3	3
COURSE SANDS AND GRAVEL		3	38	35
LARGE GRAVELS	X	38	82	44
GRAY CLAY		82	94	12
VOLCANIC GRAVELS		94	121	27
VERY HARD VOLCANIC OR BLACK SHALE		121	165	44
VERY FRACTURED VOLCANICS DG SANDS	XX	165	180	15

9. WELL CONSTRUCTION				
Depth Drilled	Feet	Depth Cased	Feet	
180		180		

HOLE DIAMETER (BIT SIZE)				
	From	To		
11	0	180	Inches	Feet

CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	13.03	.188	+2	180

Perforations:				
Type of perforation	FACTORY MILL SLOT			
Size of perforation	3 X 3/32			
From 120	feet to	140	feet	
From 160	feet to	180	feet	

Annular Seal:  Yes  No

Neat Cement to \_\_\_\_\_  Pumped  Poured

Cement Grout 0 to 100  Pumped  Poured

Concrete Grout to \_\_\_\_\_  Pumped  Poured

≥30% Bentonite Grout to \_\_\_\_\_  Pumped  Poured

Gravel Pack:  Yes  No 100 to 180  Pumped  Poured

Type: **PEAT GRAVEL**

Bentonite Chips:  Yes  No to \_\_\_\_\_  Pumped  Poured

Type: \_\_\_\_\_

Date started: **25-Apr**, 20 **11**  
Date completed: **28-Apr**, 20 **11**

7. **Water Level**  
Static water level: **10** feet below land surface  
Artesian Flow: \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
Water Temperature: **COLD** °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	35	55	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 Mack*  
by driller performing actual drilling on site of contractor.  
Date **05/05/2011**