

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

OFFICE USE ONLY  
Log No. 114066  
Permit No. \_\_\_\_\_  
Basin 076

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. 67231

1. OWNER JEFF PARSONS ADDRESS AT WELL LOCATION 3 COURTNEY CT  
MAILING ADDRESS 3 COURTNEY CT FERNLEY, NV  
SE NW FERNLEY, NV Subdivision Name: \_\_\_\_\_ County: Lyon

2. LOCATION NW 1/4 - SE 1/4 Sec 29 T 20N N/S R 25 E Latitude 39.57325°N UTM E  NAD 27  
PERMIT/WAIVER No. 021-304-72 Longitude 119.20155°W 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 MUD

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
OLD WELL		0	252	252
VOLCANIC SANDS		252	276	24
BROWN CLAY		276	293	17
FRACTURED VOLCANIC SANDS AND GRAVEL	XX	293	360	67
deepens down log # 82731				

9. WELL CONSTRUCTION

Depth Drilled 108 Feet Depth Cased 108 Feet

HOLE DIAMETER (BIT SIZE)

From	To
<u>6 1/8</u> Inches	<u>252</u> Feet <u>360</u> Feet
_____ Inches	_____ Feet _____ Feet
_____ Inches	_____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>5</u>	<u>11.86</u>	<u>.188</u>	<u>240</u>	<u>360</u>
_____	_____	_____	_____	_____

Perforations:

Type of perforation FACTORY MILL SLOT  
Size of perforation 3X 3/32

From 320 feet to 360 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 N/A to \_\_\_\_\_  Pumped  Poured  
Type: \_\_\_\_\_  
Bentonite Chips:  Yes  No N/A to \_\_\_\_\_  Pumped  Poured  
Type: \_\_\_\_\_

7. Water Level  
Static water level: 190 feet below land surface  
Artesian Flow: \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
Water Temperature: COLD °F  
Quality: GOOD

8. WELL TEST DATA

TEST METHOD:  Bailor  Pump  Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>16</u>	<u>55</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 CAPTIAL 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 Richard Adcock  
By driller performing actual drilling on site or contractor

Date 06/28/2011