

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

OFFICE USE ONLY
Log No. 116606
Permit No. _____
Basin 105

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. 67785

1. OWNER STEVE AND DEBRA WEBB ADDRESS AT WELL LOCATION 2160 FISH SPRINGS RD
MAILING ADDRESS 2160 FISH SPRINGS RD GARDNERVILLE, NV 89410
GARDNERVILLE, NV 89410 Subdivision Name: _____ County: Douglas

2. LOCATION SE 1/4 NE 1/4 Sec 6 T 12N N/S R 21 E Latitude 38.93580°N UTM E NAD 27
PERMIT/WAIVER No. 1221-06-001-021 Longitude 119.66382°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 6 5/8 WELL		0	160	160
GRAY SILTY SANDS		160	192	32
BROWN GUMMY CLAY		192	236	44
DG SANDS	X	236	241	5
BROWN CLAY		241	248	7
SOFT DG SANDS	XX	248	300	52
SMALL GRAVELS				

* deepens well log # 91298

RECEIVED
2012 JUN 12 AM 10:38
STATE ENGINEERS OFFICE

9. WELL CONSTRUCTION

Depth Drilled 140 Feet Depth Cased 140 Feet

HOLE DIAMETER (BIT SIZE)

	From	To		
<u>6 1/8</u> Inches	<u>160</u> Feet	<u>300</u> Feet		

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>5</u>	<u>3.18</u>	<u>.219</u>	<u>100</u>	<u>200</u>

Perforations:

Type of perforation FACTORY SLOT
Size of perforation .032

From 260 feet to 300 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 _____ to _____ Pumped Poured
Type: _____

Date started: 29-May , 20 12
Date completed: 01-Jun , 20 112

7. Water Level
Static water level: 80 feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: COLD °F
Quality: GOOD

8. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>20</u>	<u>60</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
Division of Water Resources, the on-site driller 1905

Signed Michael Mack
By driller performing actual drilling on site or contractor
Date 06/03/2012

38.935892°N
119.662814°W NAD27

USE ADDITIONAL SHEETS IF NECESSARY