

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

OFFICE USE ONLY
Log No. 118391
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. 66910
250 Jacks Valley

1. OWNER Benson Remy
MAILING ADDRESS 3381 Alpine View

ADDRESS AT WELL LOCATION _____
Subdivision Name _____ County: Douglas

2. LOCATION NW 1/4 SW 1/4 Sec 10 T 19 N/S R 19 E
PERMIT/WAIVER No. 1419-10-000-012
Issued by Water Resources Parcel No. _____

Latitude 39° 05' 30.2" UTM E NAD 27
Longitude 119° 20' 39.2" 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

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
<u>Backs Fill</u>		<u>0</u>	<u>4</u>	<u>4</u>
<u>Brown Gravel</u>		<u>4</u>	<u>23</u>	<u>19</u>
<u>Brown Gravel with some clay</u>		<u>23</u>	<u>X</u>	<u>X</u>
<u>Gritty Grey clay</u>		<u>105</u>	<u>129</u>	<u>24</u>
<u>Black & White Gravel</u>		<u>129</u>	<u>260</u>	<u>131</u>

9. WELL CONSTRUCTION

Depth Drilled	Feet	Depth Cased	Feet
<u>260</u>		<u>260</u>	

HOLE DIAMETER (BIT SIZE)

Inches	From	Feet	To	Feet
<u>12 1/4</u>	<u>0</u>	<u>55</u>	<u>55</u>	
<u>9 7/8</u>	<u>55</u>	<u>260</u>	<u>260</u>	

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 7/8</u>		<u>.188</u>	<u>+2</u>	<u>20</u>
<u>6 5/8</u>		<u>SDR 21</u>	<u>20</u>	<u>260</u>

Perforations:

Type of perforation Factory
Size of perforation 3/32

From	feet to	feet
<u>240</u>	<u>260</u>	
<u>200</u>	<u>220</u>	
<u>160</u>	<u>180</u>	

Annular Seal: Yes No

Material	to	to	Pumped	Poured
<input type="checkbox"/> Neat Cement			<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input checked="" type="checkbox"/> Cement Grout	<u>0</u>	<u>75</u>	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
<input type="checkbox"/> Concrete Grout			<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> ≥30% Bentonite Grout			<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured

Gravel Pack: Yes No 75 to 260
Type: 3/8 Round
Bentonite Chips: Yes No to _____
Type: _____

Date started: 7-26-13, 20
Date completed: 8-1-13, 20

7. Water Level
Static water level: 91 feet below land surface
Artesian Flow: NA G.P.M. 25+ P.S.I.
Water Temperature: Cold °F
Quality: Clear

8. WELL TEST DATA

TEST METHOD:	Bailer	Pump	Air Lift	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>			
				<u>250</u>	<u>25+</u>	
				<u>NAD 27</u>		
				<u>39.09 8458 N</u>		
				<u>19.93 8685 W</u>		

10. DRILLER'S CERTIFICATION

This well was drilled under my supervision and the report is true to the best of my knowledge.

Name: BLAIN DRILLING & PUMP CO INC.
Address: P.O. Box 1255 Carson City, NV 89702
Contractor

Nevada contractor's license number issued by the State Contractor's Board: 46497A
Nevada driller's license number issued by the Division of Water Resources, the on-site driller: 2321

Signed: C. Robinson
By driller performing actual drilling on-site or contractor
Date: 8-1-13

RECEIVED
2013 OCT 30 AM 4:00
STATE ENGINEERS OFFICE

(Rev. 05-06)

USE ADDITIONAL SHEETS IF NECESSARY