

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

OFFICE USE ONLY
Log No. 121165
Permit No. _____
Basin No. 107

PRINT OR TYPE IN BLACK INK 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. 69622
WELL NAME (if applicable): _____

1. OWNER/CLIENT NAME Gayle Perry
MAILING ADDRESS S. Colony Estates
Wellington, NV 89444

DETAILED ADDRESS AT WELL LOCATION 5 Colony Estates
Wellington, NV 89444
Subdivision Name: _____ County: Lyon
Latitude 38°47'06.2 UTM E NAD 27
Longitude 119°23'53.0 UTM N NAD 83/WGS 84

2. PLS LOCATION 8 1/4 SE 1/4 34 Sec 11 N/S 23 E
PERMIT/WAIVER NOSw 009-141-01
Issued by Water Resources Current Parcel No.

3. WORKED PERFORMED
 New Well Deepen: Orig WL# 7
 Replacement: Original well log # _____
 Recondition: Original well log # _____

4. PROPOSED USE
 Domestic
 Mining / Dewater
 Test / Other

5. WELL TYPE
 Auger Rotary RVC
 Air Mud Sonic
 Other

6. LITHOLOGIC LOG

Material Encountered	Lost Circ.	Water Strata	From	To	Thick-ness
Gravels		100	190	202	12
Clay			202	207	5
Sand & Gravels			207	263	56
White Clay			263	268	5
Sand			268	273	5
Brown Clay			273	281	8
Large Sand & Med Gravels			281	345	64

9. WELL CONSTRUCTION
Depth Drilled: 345 Feet Depth Cased: 345 Feet
HOLE DIAMETER (BIT SIZE)
6/8 Inches From 190 Feet To 345 Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>5</u>	<u>12</u>	<u>.188</u>	<u>175</u>	<u>345</u>

PERFORATIONS:
Type of perforation: Factory
Size of perforation: 1/4" - 3/8"
From 305 Feet To 345 Feet

ANNULAR MATERIALS
 Sanitary Seal _____ to _____
 Neat Cement _____ to _____ Pumped Poured
 Cement Grout _____ to _____ Pumped Poured
 Concrete Grout _____ to _____ Pumped Poured
 Bentonite Chips _____ to _____ Pumped Poured
 Bentonite Grout _____ to _____ Pumped Poured
 15 % 20 % Other, explain: _____
 Gravel Pack [> 0.2 in.] _____ to _____ Pumped Poured
 Sand Pack [< 0.2 in.] _____ to _____ Pumped Poured
 Other, explain: _____

Date started: 9-22 , 20 14
Date completed: 9-25 , 20 14

7. WATER QUALITIES
Static water level: 178 Feet below land surface
Artesian Flow: no G.P.M. 25+ P.S.I.
Water Temperature: Cold ° Fahrenheit
Water Quality: Clear

8. WELL TEST DATA

Test Method:	Bailer	Pump	Air Lift	G.P.M.	Draw Down (Feet Below Static)	Recorded Time (Hours)
<u>220 FT</u>			<input checked="" type="checkbox"/>	<u>25+</u>		<u>3.5</u>

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision. This 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 as issued by the State Contractor's Board: 46998A
Nevada well driller's license number as issued by the Nevada Division of Water Resources (on-site driller): 2321
Signed: C. Robinson
By driller performing actual drilling on site or contractor
Date: 10-6-14

Deepens Unknown well log