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

OFFICE USE ONLY
Log No. 121808
Permit No.
Basin No. ICS

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. 72977
WELL NAME (*if applicable*):

1. OWNER/CLIENT NAME GEORGEANNA BERGOLANI
MAILING ADDRESS 1650 SUNSHINE RD
MINDEN, NV 89423

DETAILED ADDRESS AT WELL LOCATION 1650 SUNSHINE RD
MINDEN, NV 89423
Subdivision Name: County: Douglas

2. PLS LOCATION SW ¼ SW ¼ 2 Sec 13 N/S 20 E
PERMIT/WAIVER NO. DOM-15-07 (Issued by Water Resources) 1320-02-002-078 (Current Parcel No.)

Latitude 39.015144*N UTM E ☐ NAD 27
Longitude 119.709879*W UTM N ☒ NAD 83/WGS 84

3. WORKED PERFORMED
☐ New Well ☒ Deepen: Orig WL# N/A
☐ Replacement: Original well log #
☐ Recondition: Original well log #

4. PROPOSED USE
☒ Domestic ☐ Irrigation ☐ Monitor
☐ Mining / Dewater ☐ Com / Ind ☐ Stock
☐ Test / Other ☐ Mun / QM ☐ Rec

5. WELL TYPE
☐ Auger ☒ Rotary ☐ RVC
☐ Air ☒ Mud ☐ Sonic
☐ Other

6. LITHOLOGIC LOG

| Material Encountered | Lost Circ. | Water Strata | From | To |
|---|---|---|---|---|
| OLD 6 5/8 WELL | | | 0 | 140 |
| COURSE SANDS | | | 140 | 165 |
| BROWN CLAY | | | 165 | 193 |
| DG SANDS AND SILTY SANDS | | XXX | 193 | 240 |

legacy without log
Nad27
39015235°N
119.70587°W

Date started: 11-Feb , 20 15
Date completed: 13-Feb , 20 15

7. WATER QUALITIES
Static water level: 124 Feet below land surface
Artesian Flow: G.P.M. P.S.I.
Water Temperature: 49 ° Fahrenheit
Water Quality: GOOD

8. WELL TEST DATA
Test Method: ☐ Bailer ☐ Pump ☒ Air Lift

| G.P.M. | Draw Down (Feet Below Static) | Recorded Time (Hours) |
|---|---|---|
| 18 | 45 | 3 HRS |

9. INSTRUCTION
Depth Drilled: 100 Feet Depth Cased: 100 Feet

HOLE DIAMETER (BIT SIZE)

| | | From | | To | |
|---|---|---|---|---|---|
| 6 1/8 | Inches | 140 | Feet | 240 | Feet |
| | Inches | | Feet | | Feet |
| | Inches | | Feet | | Feet |

CASING SCHEDULE

| Size O.D. (Inches) | Weight/Ft. (Pounds) | Wall Thickness (Inches) | From (Feet) | To (Feet) |
|---|---|---|---|---|
| 5 | 3.45 | .216 | 100 | 240 |

ANNULAR MATERIALS
Sanitary Seal ☐ Yes ☐ No

| | | | | |
|---|---|---|---|---|
| ☐ Neat Cement | N/A | to | ☐ Pumped | ☐ Poured |
| ☐ Cement Grout | | to | ☐ Pumped | ☐ Poured |
| ☐ Concrete Grout | | to | ☐ Pumped | ☐ Poured |
| ☐ Bentonite Chips | | to | ☐ Pumped | ☐ Poured |
| ☐ Gravel Pack [ > 0.2 in. ] | N/A | to | ☐ Pumped | ☐ Poured |
| ☐ Sand Pack [ < 0.2 in. ] | | to | ☐ Pumped | ☐ Poured |
| ☐ Other, explain: | | to | ☐ Pumped | ☐ Poured |

PERFORATIONS:
Type of perforation: FACTORY MILL SLOT
Size of perforation: 0.032

| | | | | |
|---|---|---|---|---|
| From | 200 | Feet | To 240 | Feet |
| From | | Feet | To | Feet |
| From | | Feet | To | Feet |
| From | | Feet | To | Feet |
| From | | Feet | To | Feet |

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision. This report is true to the best of my knowledge.
Name CAPITAL CITY WELL DRILLING AND PUMP SERVICE INC. (Contractor)
Address 20 KIT KAT DRIVE CARSON CITY, NV 89706 (Contractor)
Nevada contractor's license number as issued by the *State Contractor's Board*: 0055548
Nevada well driller's license number as issued by the *Nevada Division of Water Resources (on-site driller)*: 1905
Signed: (By driller performing actual drilling on site or contractor)
Date: 2/15/2015

(Rev. 12-13) USE ADDITIONAL SHEETS IF NECESSARY pg. of pg.