

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

OFFICE USE ONLY
Log No. 122068
Permit No. _____
Basin No. 105

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. 70834
WELL NAME (if applicable): _____

1. OWNER/CLIENT NAME Tiff Wass
MAILING ADDRESS 1767 Solitude Rd
W 89410

DETAILED ADDRESS AT WELL LOCATION 261 Sierra County Rd
Subdivision Name: _____ County: Douglas

2. PLS LOCATION SW 1/4 SW 1/4 10 Sec 12 N/S 19 E
PERMIT/WAIVER NO. 119-10052662
Issued by Water Resources Current Parcel No.

Latitude 38° 54.799 UTM E NAD 27
Longitude 114° 50.472 UTM N NAD 83/WGS 84

3. WORKED PERFORMED
 New Well Deepen: Orig WL# _____
 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
 Mud Sonic
 Air Other

6. LITHOLOGIC LOG					
Material Encountered	Lost Circ.	Water Strata	From	To	Thickness
Dirt			0	8	
DG - Sand			8	130	
DG - clay			130	145	
DG - SAND			145	210	
DG - Gravel S			210	260	
DG - fine rock			260	295	
fine rock			295	340	
DG - SAND			340	410	
Coarse SAND DG			410	425	

9. WELL CONSTRUCTION
Depth Drilled: 425 Feet
Depth Cased: 425 Feet

HOLE DIAMETER (BIT SIZE)			
Inches	From	To	Feet
<u>1 1/8"</u>	0	260	Feet
<u>6 1/8"</u>	260	425	Feet

CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 7/8</u>	<u>12</u>	<u>1/8</u>	<u>1</u>	<u>20</u>
<u>5</u>	<u>11</u>	<u>1/8</u>	<u>20</u>	<u>425</u>

PERFORATIONS:
Type of perforation: fast cut
Size of perforation: 40 AW
From 225 Feet To 260 Feet
From 375 Feet To 425 Feet

ANNULAR MATERIALS
 Sanitary Seal _____ to _____
 Neat Cement _____ to _____
 Cement Grout _____ to _____
 Concrete Grout 104 to 0
 Bentonite Chips _____ to _____
 Bentonite Grout _____ to _____
 15 % 20 % Other, explain: _____
 Gravel Pack [> 0.2 in.] _____ to _____
 Sand Pack [< 0.2 in.] _____ to _____
 Other, explain: _____

Date started: 4/26, 20 14
Date completed: 5/2, 20 14

7. WATER QUALITIES
Static water level: 65' Feet below land surface
Artesian Flow: NA G.P.M. P.S.I.
Water Temperature: COLD ° Fahrenheit
Water Quality: clear

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

8. WELL TEST DATA			
Test Method:	G.P.M.	Draw Down (Feet Below Static)	Recorded Time (Hours)
<input type="checkbox"/> Bailor <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift			
	<u>20</u>		<u>4</u>

Nevada contractor's license number as issued by the State Contractor's Board: 46491A
Nevada well driller's license number as issued by the Nevada Division of Water Resources (on-site driller): 2139
Signed: [Signature]
Date: 3/29/15