

OFFICE USE ONLY
 Log No. 128104
 Permit No. _____
 Basin 105

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

WELL DRILLER'S REPORT
 Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. 69624

1. OWNER David Von Hoffmann ADDRESS AT WELL LOCATION 1304 Kingsbury
 MAILING ADDRESS 1304 Kingsbury Grade
20 NJ
 2. LOCATION SE 1/4 NE 1/4 Sec. 04 T. 12 N/S R. 19 E. Douglas County
 PERMIT NO. 1219.04.001.004 Issued by Water Resources Parcel No. Subdivision Name

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Abandon 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
Black Flac.		240	303	63
Cobbles		303	315	12
Sand & Gravel		315	328	13
Black Flac.		328	425	97
38° 55.973' N NAD83 119° 59.901' W				
Nad 27 38.932976° N 119.647335° W				
deeper unknown log				

8. WELL CONSTRUCTION
 Depth Drilled 425 Feet Depth Cased 425 Feet
 HOLE DIAMETER (BIT SIZE)
 From 7 7/8 Inches To 4 1/2 Feet
 _____ Inches _____ Feet
 _____ Inches _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 5/8</u>		<u>.188</u>	<u>225</u>	<u>425</u>

Perforations:
 Type perforation factory cut
 Size perforation 6/8 x 3
 From 345 feet to 365 feet
 From 385 feet to 425 feet
 From 405 feet to 425 feet
 From 265 feet to 285 feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout
 Depth of Seal _____
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level 207 feet below land surface
 Artesian flow no G.P.M. 8-10 P.S.I.
 Water temperature 58 °F Quality clear

Date started 8-4-15, 20____
 Date completed 8-6-15, 20____

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	<u>8-10</u>		<u>4</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 355 Carson City, NV 89402
 Nevada contractor's license number issued by the State Contractor's Board 69497
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 320
 Signed C. Robinson By driller performing actual drilling on site or contractor
 Date 8-17-15