

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

OFFICE USE ONLY
Log No. 123600
Permit No. _____
Basin No. 083

**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. 73201
WELL NAME (if applicable): _____

1. OWNER/CLIENT NAME Heidi Healy
MAILING ADDRESS 267 W. Oakwood Blvd.
Redwood City, CA 94061

DETAILED ADDRESS AT WELL LOCATION 6100 Goldfield Rd
V.C.H., NV 89521
Subdivision Name: _____ County: Storey

2. PLS LOCATION NW ¼ SE ¼ 21 Sec 18 N/S 21 E
PERMIT/WAIVER NO. 004-221-54
Issued by Water Resources Current Parcel No.

Latitude 39.40991 UTM E NAD 27
Longitude 119.62416 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
 Air Mud Sonic
 Other

6. LITHOLOGIC LOG

Material Encountered	Lost Circ.	Water Strata	From	To
Brown clay, rock, dirt			0	5
Gray clay, rock			5	10
Tan clay, rock			10	40
Tan clay			40	120
Tan clay, gravel			120	260
Multi colored rock, gravel			260	300
Gray & red volcanic rock			300	320
Multi colored rock, gravel			320	520
Brown rock w/ clay			52	60
Purple volcanic rock			600	740
Gray volcanic rock		X	740	960
Blue clay stone		X	960	1000
Red volcanic & multi colored rock			1000	1040
Gray volcanic & multi colored rock			1040	1060
Gray, black, and white volcanic rock			1060	1138
Clay			1138	1140
Purple volcanic rock, hard			1140	1200
Gray volcanic rock, hard			1200	1250
Lost circulation, No returns	x	X	1250	1321

9. INSTRUCTION

Depth Drilled: 1321 Feet Depth Cased: 1321 Feet

HOLE DIAMETER (BIT SIZE)

From	To	From	To
<u>10 5/8</u> Inches	<u>55</u> Feet	<u>55</u> Feet	<u>518</u> Feet
<u>6 1/8</u> Inches	<u>518</u> Feet	<u>518</u> Feet	<u>1000</u> Feet
<u>4 3/4</u> Inches	<u>1000</u> Feet	<u>1000</u> Feet	<u>1321</u> 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>+2</u>	<u>518</u>
<u>5 9/16</u>		<u>.188</u>	<u>430</u>	<u>950</u>
<u>4</u>		<u>.188</u>	<u>940</u>	<u>1321</u>

ANNULAR MATERIALS

Sanitary Seal Yes No

Neat Cement _____ to _____ Pumped Poured

Cement Grout _____ to _____ Pumped Poured

Concrete Grout 0 to 55 Pumped Poured

Bentonite Chips _____ to _____ Pumped Poured

Gravel Pack [> 0.2 in.] 55 to 518 Pumped Poured

Sand Pack [< 0.2 in.] _____ to _____ Pumped Poured

Other, explain: _____ to _____ Pumped Poured

PERFORATIONS:

Type of perforation: Air perf., torch

Size of perforation: Air - 2 rows, 1/8 x 3

From	To	From	To
<u>(Air) 820</u>	<u>920</u>	<u>(Torch) 982</u>	<u>1003</u>
<u>(Torch) 982</u>	<u>1003</u>	<u>(Torch) 1081</u>	<u>1108</u>
<u>(Torch) 1081</u>	<u>1108</u>	<u>(Torch) 1297</u>	<u>1318</u>
<u>(Torch) 1297</u>	<u>1318</u>		

Date started: 30-Jun .20 15
Date completed: 2-Oct .20 15

7. WATER QUALITIES
Static water level: 488 Feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: _____ ° Fahrenheit
Water Quality: _____

8. WELL TEST DATA

Test Method:	G.P.M.	Draw Down (Feet Below Static)	Recorded Time (Hours)
<input type="checkbox"/> Bailor <input checked="" type="checkbox"/> Pump <input type="checkbox"/> Air Lift	<u>6</u>	<u>900</u>	<u>6</u>

10. DRILLER'S CERTIFICATION

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

Name A.S.A.P. Pump & Well Service, LLC. Contractor
Address P.O. Box 60130 Reno, Nevada 89506 Contractor

Nevada contractor's license number as issued by the State Contractor's Board: 35387C
Nevada well driller's license number as issued by the Nevada Division of Water Resources (on-site driller): 2010 / 2362

Signed: Lance Welch
By driller performing actual drilling on site or contractor

Date: 10-20-15

(Rev. 12-13)

USE ADDITIONAL SHEETS IF NECESSARY