



OFFICE USE ONLY
 Log No. 16963
 Permit No. _____
 Basin _____

WELL DRILLERS REPORT
 Please complete this form in its entirety

1. OWNER John Jovicich ADDRESS P.O. Box 4006
South Lake Tahoe, CA 95731

2. LOCATION NE 1/2 NE 1/4 NE 1/4 Sec. 28 T. 13 N/S R. 19 E. Washoe Douglas County
 PERMIT NO. _____

3. TYPE OF WORK	4. PROPOSED USE	5. TYPE WELL
New Well <input checked="" type="checkbox"/> Recondition <input type="checkbox"/>	Domestic <input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Test <input type="checkbox"/>	Cable <input type="checkbox"/> Rotary <input checked="" type="checkbox"/>
Deepen <input type="checkbox"/> Other <input type="checkbox"/>	Municipal <input type="checkbox"/> Industrial <input type="checkbox"/> Stock <input type="checkbox"/>	Other <input type="checkbox"/> AIR

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Top soil some clay brown & decomposed granite sand mixed		0	10	10
Fine to coarse decomposed granite sand-very loose		10	100	90
Hard & soft brown to white granite-mostly hard & very slow drilling. Inconsis- tantly fractured from 225-325		100	325	225
Hard black & white granite w/ some fracture zones 2 ft thick, fracture zones are soft		325	450	125

8. WELL CONSTRUCTION

Diameter hole 6 inches Total depth 450 feet
 Casing record 0-170' x 6 5/8 OD 93-383' x 50D
 Weight per foot 12.89 8.64 Thickness 1.88

Diameter	From	To
<u>10</u> inches	<u>0</u> feet	<u>50</u> feet
<u>8 1/2</u> inches	<u>50</u> feet	<u>383</u> feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet

Surface seal: Yes No Type transit mix
 Depth of seal 50' feet
 Gravel packed: Yes No
 Gravel packed from _____ feet to _____ feet

Perforations:
 Type perforation factory mill slot
 Size perforation 5/32 x 2 1/2"
 From 170 feet to 383 feet
 From _____ feet to _____ feet

9. WATER LEVEL

Static water level 26.7 Feet below land surface
 Flow _____ G.P.M.
 Water temperature cold °F. Quality not tested

Date started 8-3-77, 19_____
 Date completed 8-15-77, 19_____

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump
AIR BLOWN:	5 GPM @	350' depth	

10. DRILLERS CERTIFICATION

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

Name W.L. McDonald & Co., Inc.
 Address P.O. Box 404; Sparks, NV 89431
 Nevada contractor's license number 9767
 Nevada driller's license number 805
 Signed Tony Betita by W.L. McDonald
 Tony Betita by: W.L. McDonald
 Date 17 August, 1977

BAILER TEST

G.P.M. _____	Draw down _____ feet	_____ hours
G.P.M. _____	Draw down _____ feet	_____ hours
G.P.M. _____	Draw down _____ feet	_____ hours