

OFFICE USE ONLY  
 Log No. 28894  
 Permit No. \_\_\_\_\_  
 Basin B-105

**WELL DRILLERS REPORT**

PRINT OR TYPE ONLY

Please complete this form in its entirety

NOTICE OF INTENT NO. 8563

OWNER Gardnerville-Minden Smith ADDRESS AT WELL LOCATION Pal Byington Ranch off Genoa Ave  
 MAILING ADDRESS Minden, NV  
 2. LOCATION NE 1/4 NE 1/4 Sec. 1 T. 13 N/S R. 19 E Douglas County  
 PERMIT NO. NEV 40027 - DEP # Issued by Water Resources Parcel No. Subdivision Name

3. TYPE OF WORK  
 New Well  Recondition   
 Deepen  Other

4. PROPOSED USE Monitor  
 Domestic  Irrigation  Test   
 Municipal  Industrial  Stock  Other

5. TYPE WELL  
 Cable  Rotary   
 Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Clay		0	4	
SAND & Gravel		4	10	
DC + clay		10	15	
DC + SAND		15	20	
Land application of sludge site.				

8. WELL CONSTRUCTION  
 Diameter hole 8 inches Total depth 20 feet  
 Casing record 20  
 Weight per foot \_\_\_\_\_ Thickness Schal. 40  
 Diameter? 8 inches From 0 feet To 20 feet  
 \_\_\_\_\_ inches \_\_\_\_\_ feet \_\_\_\_\_ feet  
 Surface seal: Yes  No  Type Concrete  
 Depth of seal 6 feet  
 Gravel packed: Yes  No   
 Gravel packed from 8 feet to 20 feet  
 Perforations:  
 Type perforation SKILL SAW  
 Size perforation 3x3/32  
 From 10 feet to 15 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

9. WATER LEVEL  
 Static water level 6 feet below land surface  
 Flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature \_\_\_\_\_ ° F. Quality \_\_\_\_\_

Date started 7-12-87 19\_\_\_\_  
 Date completed 7-12-87 19\_\_\_\_

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump

10. DRILLERS CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.  
 Name KAWCHACK DRILLING INC. Contractor  
 Address Box 536 Gardnerville, NV Contractor  
 Nevada contractor's license number 021268  
 Nevada contractor's drillers number 1380  
 Nevada driller's license number 1425 Actual Driller  
 Signed Eddy Kawchack Contractor  
 Date 7-17-87

BAILER TEST  
 G.P.M. \_\_\_\_\_ Draw down \_\_\_\_\_ feet \_\_\_\_\_ hours  
 G.P.M. \_\_\_\_\_ Draw down \_\_\_\_\_ feet \_\_\_\_\_ hours  
 G.P.M. \_\_\_\_\_ Draw down \_\_\_\_\_ feet \_\_\_\_\_ hours