

OFFICE USE ONLY
 Log No. 31132
 Permit No. _____
 Basin 6-90

WELL DRILLER'S REPORT

Please complete this form in its entirety

PRINT OR TYPE ONLY

NOTICE OF INTENT NO. 11631

1. OWNER Harrak's-Lake Tahoe ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS P.O. Box 8 Hwy 50 at Stateline
State Line, Nevada 89449
 2. LOCATION N 1/2 SE 1/4 Sec 27 T 13 R 18 E Douglas County
 PERMIT NO. M 10-124 Issued by Water Resources Parcel No. _____ Subdivision Name _____

3. TYPE OF WORK M-4 4. PROPOSED USE 5. TYPE WELL

New Well <input checked="" type="checkbox"/>	Recondition <input type="checkbox"/>	Domestic <input type="checkbox"/>	Irrigation <input type="checkbox"/>	Test <input checked="" type="checkbox"/>	Cable <input type="checkbox"/>	Rotary <input type="checkbox"/>
Deepen <input type="checkbox"/>	Other <input type="checkbox"/>	Municipal <input type="checkbox"/>	Industrial <input type="checkbox"/>	Stock <input type="checkbox"/>	Other <input checked="" type="checkbox"/>	

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Asphalt		0	0.5'	0.5'
Silty sand		0.5	2'	1.5'
Clayey sand		2'	6'	4'
Silty sand		6'	7.5'	1.5'
decomposed granodiorite		7.5	8'	0.5'
granodiorite		8'	30'	22'

FEB 27 1989
STATE ENGINEERS

8. WELL CONSTRUCTION

Diameter 8 inches Total depth 30 feet

Casing record 2" Sch. 40 PVC

Weight per foot _____ Thickness _____

Diameter	From	To
<u>2</u> inches	<u>0</u> feet	<u>30</u> feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet

Surface seal: Yes No Type Cement

Depth of seal 12 feet

Gravel packed: Yes No

Gravel packed from 15 feet to 30 feet

Perforations:
 Type perforation machining slots
 Size perforation 0.020 in.
 From 20 feet to 35 feet
 From _____ feet to _____ feet

9. WATER LEVEL

Static water level 22.4 feet below land surface

Flow _____ G.P.M. _____ P.S.I.

Water temperature 53 °F Quality _____

Date started 2-13, 1989
 Date completed 2-14, 1989

7. WELL TEST DATA

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

10. DRILLER'S CERTIFICATION

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

Name Paul Anderson Contractor

Address 1635 Bellford Rd. Reno Nev, 89509

Nevada contractor's license number issued by the State Contractor's Board _____

Nevada contractor's driller's number issued by the Division of Water Resources _____

Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1028

Signed Paul Anderson
 By driller performing actual drilling on site or contractor

Date _____

BAILER TEST

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

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

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