

Log No. **47128**
Permit No. **105**
Basin. **105**
J
27998

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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. **27998**

1. OWNER **Jim Norris '95** JAN 23 AM 11:41
MAILING ADDRESS **440 Foothill RD. Foothill RD, Gard. NV 89410**
ADDRESS AT WELL LOCATION **220 GDA-Unit CRT Minden, NV 89423**
2. LOCATION **NW 1/4 Substate Sec. 12** N/S R. **19 E Douglas** County
PERMIT NO. **19-042-27** Issued by Water Resources Parcel No. Subdivision Name

3. WORK PERFORMED
 New Well Replace Recondition Deepen Abandon Other
4. PROPOSED USE
 Domestic Municipal/Industrial Irrigation Monitor Test Stock
5. WELL TYPE
 Cable Rotary RVC Air Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
OG clay + Boulders		1	60	
OG + clay		60	92	
clay		92	127	
OG course sand + Bolders		127	167	
clay		167	180	
OG Sand + clay		180	225	
Boulder		225	231	
OG Sand		231	260	

8. WELL CONSTRUCTION
Depth Drilled **260** Feet Depth Cased **260** Feet
HOLE DIAMETER (BIT SIZE)
From **9 7/8** Inches To **260** Feet
Inches Feet
Inches Feet
Inches Feet
CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 7/8	7	.188	0	260

Perforations:
Type perforation **Factory Perf**
Size perforation **3 x 5/32**
From **240** feet to **260** feet
From feet to feet
From feet to feet
From feet to feet

Surface Seal: Yes No Seal Type Neat Cement Cement Grout Concrete Grout
Depth of Seal **100**
Placement Method: Pumped Poured
Gravel Packed: Yes No
From **100** feet to **260** feet

9. WATER LEVEL
Static water level **67** feet below land surface
Artesian flow _____ G.P.M. _____ P.S.I.
Water temperature **cold** °F Quality _____

Date started **11/26** 19 **94**
Date completed **1/13** 19 **95**

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	125		2 HRS
AIR Lift			

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name **Kowchack Drilling Inc.** Contractor
Address **P.O. Box 1359** Contractor
Minden, NV 89423
Nevada contractor's license number issued by the State Contractor's Board **021268**
Nevada driller's license number issued by the Division of Water Resources, the on-site driller **11380**
Signed **E. Kowchack**
By driller performing actual drilling on site or contractor
Date **1/21/95**