WHITE—DIVISION OF WATER RESOURCES
CANARY—CLIENT'S COPY
PINK—WELL DRILLER'S COPY

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

STATE OF NEVADA
DIVISION OF WATER RESOURCES

WELL DRILLER'S REPORT

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

OFFICE USE ONLY
Log No. 69620
Permit No.
Basin 105

NOTICE OF INTENT NO. 33681

1. OWNER C.O.D. Garage
MAILING ADDRESS P.O. Box 7
Minden, NV 89423

ADDRESS AT WELL LOCATION 1593 Esmeralda
Minden, NV

2. LOCATION ~~NW~~ NE¼ NW ¼ Sec. 32 T. 12 N/S R. 20 E. Douglas County
PERMIT NO. M0-1090 (Issued by Water Resources) 25-200-53 (Parcel No.) Minden, NV (Subdivision Name)

3. WORK PERFORMED
☐ New Well ☐ Replace ☐ Recondition
☐ Deepen ☒ Abandon ☐ Other

4. PROPOSED USE
☐ Domestic ☐ Irrigation ☐ Test
☐ Municipal/Industrial ☒ Monitor ☐ Stock

5. WELL TYPE
☐ Cable ☐ Rotary ☐ RVC
☐ Air ☐ Other unknown

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Two monitor wells, 2" PVC Perforated from Approx 2½' to 12', factory Perfs.				
Wells were plugged with Neat Cement from the bottom to the Surface as per Sect. NAC 534.420 of the Nevada State Codes				

Date started 9/16, 19 97
Date completed 9/16, 19 97

7. WELL TEST DATA
TEST METHOD: ☐ Bailer ☐ Pump ☐ Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)

8. WELL CONSTRUCTION
Depth Drilled ____ Feet Depth Cased ____ Feet

HOLE DIAMETER (BIT SIZE)

	From	To
Inches	Feet	Feet
Inches	Feet	Feet
Inches	Feet	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)

Perforations:
Type perforation
Size perforation
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet

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

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

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name Lawchack 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 1380
Signed Eddy J Lawchack (By driller performing actual drilling on site or contractor)
Date 9/16/97

(Rev. 3-91) USE ADDITIONAL SHEETS IF NECESSARY (O)-627