

OFFICE USE ONLY
Log No. 74738
Permit No. 103
Basin. 103
NOTICE OF INTENT NO. 37805

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

WELL DRILLER'S REPORT

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

1. OWNER Gene Saccone ADDRESS AT WELL LOCATION Stagecoach Nevada
MAILING ADDRESS _____
2. LOCATION SE 1/4 NW 1/4 Sec 11 T 17 N/S R 23 E 0 Nyon County
PERMIT NO. 19-383-11 Parcel No. Lot 1 Subdivision Name _____
Issued by Water Resources _____

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 Hand

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>Soil</u>		<u>0</u>	<u>4</u>	
<u>Sand Gravel</u>		<u>4</u>	<u>74</u>	
<u>Tanish brown Clay Gravel Sand</u>		<u>74</u>	<u>101</u>	
<u>Gravel Boulder</u>		<u>101</u>	<u>139</u>	
		<u>139</u>	<u>160</u>	

8. WELL CONSTRUCTION
Depth Drilled 160 Feet Depth Cased 160 Feet

HOLE DIAMETER (BIT SIZE)
From 0 To 160
10578 Inches _____ Feet _____
_____ Inches _____ Feet _____
_____ Inches _____ Feet _____

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6.5</u>	<u>13.00</u>	<u>3/16</u>	<u>71</u>	<u>20</u>
<u>6</u>	<u>3.00</u>	<u>SCH 40</u>	<u>20</u>	<u>160</u>

Perforations:
Type perforation scell Saw
Size perforation 1 1/2 x 7" Long 3 Rows
From 140 feet to 160 feet
From _____ feet to _____ feet

Surface Seal: Yes No Seal Type Neat Cement
Depth of Seal 0-50
 Cement Grout
Placement Method: Dumped Poured Concrete Grout

Gravel Packed: Yes No
From 50 feet to 160 feet

9. WATER LEVEL
Static water level 56 feet below land surface
Artesian flow _____ G.P.M. _____ P.S.I.
Water temperature _____ °F Quality _____

Date started 3-8 1999
Date completed 3-9 1999

7. WELL TEST DATA

TEST METHOD	Bailer	Pump	Air Lift	Time (Hours)
<u>G.P.M.</u>			<input checked="" type="checkbox"/>	
<u>15</u>				

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name Leah Pulking Inc Contractor
Address PO Box 579 Contractor
Silver Springs NV 89429
Nevada contractor's license number 00318411
issued by the State Contractor's Board.
Nevada driller's license number issued by the Division of Water Resources, the on-site driller
Signed [Signature]
By driller performing actual drilling on site or contractor
Date 3-11-99

RECEIVED
99 APR 21 AM 11:25
STATE ENGINEERING OFFICE