

STATE OF NEVADA  
DIVISION OF WATER RESOURCES  
WELL DRILLER'S REPORT

OFFICE USE ONLY  
Log No. 74852  
Permit No. 105  
Basin.....

PRINT OR TYPE ONLY  
DO NOT WRITE ON BACK

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

NOTICE OF INTENT NO. 216828

1. OWNER DE JANSER 1589 ADDRESS AT WELL LOCATION 254 Shadow Mtn Cir. Minden NV  
MAILING ADDRESS Saratoga Rd. Minden

2. LOCATION SW 1/4 36 1/4 Sec 10 T 13 N S R 19 E Douglas County  
PERMIT NO. 19-402-06 Foot hills 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  RVG  
 Air  Other Mud

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>Large Boulders and Large Rocks</u>		<u>0</u>	<u>45</u>	<u>45</u>
<u>DG Sands and Boulders</u>		<u>45</u>	<u>160</u>	
<u>DG Sands and Clay Strata</u>		<u>160</u>	<u>220</u>	
<u>DG Granite and small clay strata</u>		<u>220</u>	<u>275</u>	
<u>Rusty DG</u>				
<u>Solid DG Rusty xx</u>		<u>275</u>	<u>300</u>	
<u>Granite Fractured</u>				

8. WELL CONSTRUCTION  
Depth Drilled 300 Feet Depth Cased 300' Feet  
HOLE DIAMETER (BIT SIZE)  
From To  
10 3/4 Inches 0 Feet 300 Feet  
Inches Feet Feet  
Inches Feet Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 5/8</u>	<u>13.03</u>	<u>1.88</u>	<u>0</u>	<u>300</u>

Perforations:  
Type perforation Mill Slot  
Size perforation 3 x 3/32  
From 280 feet to 300 feet  
From feet to feet  
From feet to feet  
From feet to feet  
From feet to feet

Surface Seal:  Yes  No Seal Type:  Neat Cement  
Depth of Seal 58  Cement Grout  
Placement Method:  Pumped  Concrete Grout  
 Poured  
Gravel Packed:  Yes  No  
From 58 feet to 300 feet

9. WATER LEVEL  
Static water level 140 feet below land surface  
Artesian flow \_\_\_\_\_ G.P.M. 25 P.S.I.  
Water temperature Cold °F Quality Good

Date started 3-21 1999  
Date completed 3-24 1999

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	<u>25</u>	<u>55</u>	<u>3 HRS</u>

10. DRILLER'S CERTIFICATION  
This well was drilled under my supervision and the report is true to the best of my knowledge.  
Name Capital City Well Drilling Contractor  
Address 20 KAY DR. CARSON CITY NV 89706 Contractor  
Nevada contractor's license number issued by the State Contractor's Board 41775  
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1905  
Signed Michael A. Hark  
By driller performing actual drilling on site or contractor  
Date 3-24-99