

OFFICE USE ONLY  
 Log No. 77210  
 Permit No. 107  
 Basin 107

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

NOTICE OF INTENT NO. 08178

1. OWNER Gary Lafuer  
 MAILING ADDRESS Gardnerville W. 89410  
 ADDRESS AT WELL LOCATION Hunters Glen. Address not given yet.  
 2. LOCATION NW 1/4 NW 1/4 Sec. 35 T 12 S R 23 E Lyon County  
 PERMIT NO. 010-141-10  
 Issued by Water Resources Parcel No. 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 Mud

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Brown Hard Pan Clay		0	6	6
DB sands and Brown clay		6	37	31
Gray Sandy Clay		37	96	59
Gray Silty Clay		96	105	9
Coarse DB Sands	XX	105	115	10
Brown Clay Balls and DB Sands	X	115	136	21
Small Gray Clay Strips				
Coarse DB Sands	XX	136	160	24

8. WELL CONSTRUCTION  
 Depth Drilled 160 Feet Depth Cased 160 Feet  
 HOLE DIAMETER (BIT SIZE)  
 From 12 3/4 Inches To 160 Feet  
 Inches Feet Feet  
 Inches Feet Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>8 5/8</u>	<u>15.65</u>	<u>1.88</u>	<u>0</u>	<u>160</u>

Perforations:  
 Type perforation Mill slot  
 Size perforation 3X3/32  
 From 100 feet to 180 feet  
 From 120 feet to 140 Blank feet  
 From 140 feet to 160 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 160' feet

9. WATER LEVEL  
 Static water level: 15 feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. 55+ P.S.I.  
 Water temperature Cold °F Quality Good

Date started 9/28, 1999  
 Date completed 9/29, 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>537</u>	<u>45</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 Kit Kat Dr. Carson City NV 89701 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 L. Deed  
 By driller performing actual drilling on site or contractor  
 Date 9/29/99

RECEIVED  
 99 OCT -4 AM 9:50  
 STATE ENGINEERS OFFICE