

COPIES TO  
 - DIVISION OF WATER RESOURCES  
 - CLIENT'S COPY  
 - WELL DRILLER'S COPY

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

OFFICE USE ONLY  
 Log No. 82109  
 Permit No. \_\_\_\_\_  
 Basin AS  
 NOTICE OF INTENT NO. 42016

PRINT OR TYPE ONLY

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

1. OWNER **JULIUN LEROY**  
 MAILING ADDRESS 912 CENTERVILLE LANE  
GARDNERVILLE, NV 89410  
 ADDRESS AT WELL LOCATION 912 CENTERVILLE LANE  
GARDNERVILLE, NV 89410

2. LOCATION NE 1/4 NE 1/4 Sec 18 T 12 N R 20 E **DOUGLAS** County  
 PERMIT NO. 27-020-010

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
HARDPAN BROWN CLAY		0	6	6
COURSE GRAVELS AND SANDS		6	24	18
LARGE OBSIDIAN GRAVELS		24	73	49
SMALL COURSE GRAVELS		73	110	37
FRACTURED SANDS AND GRAVELS		110	140	30

8. WELL CONSTRUCTION  
 Depth Drilled 140 Feet Depth Cased 140 Feet  
 HOLE DIAMETER (BIT SIZE)  
 From 10 3/4 Inches To 0 Feet  
140 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>.188</u>	<u>0</u>	<u>140</u>

Perforations:  
 Type perforation **FACTORY MILL SLOTT**  
 Size perforation **3 X 3/32**  
 From 115 feet to 135 feet  
 From **BLANK** 135 feet to 140 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  
 Depth of Seal 100  Neat Cement  
 Placement Method:  Pumped  Cement Grout  
 Poured  Concrete Grout  
 Gravel Packed:  Yes  No  
 From 100 feet to 140 feet

9. WATER LEVEL  
 Static water level \_\_\_\_\_ 2 feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. 35 + P.S.I  
 Water temperature COLD °F Quality **GOOD**

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)

Date started 10-19, 20 00  
 Date completed 10-20, 20 00

7. WELL TEST DATE

TEST METHOD:	<input type="checkbox"/> Bailer	<input type="checkbox"/> Pump	<input checked="" type="checkbox"/> Air Lift
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)	
<u>35+</u>	<u>25</u>	<u>2 HRS</u>	

Address 20 KIT KAT DRIVE  
 (CONTRACTOR)  
**CARSON CITY, NV 89706**  
 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 Hack  
 By driller performing actual drilling on site or contractor  
 Date 10-23-00

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 00 NOV - 1 AM 8:28  
 STATE ENGINEERS OFFICE