

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

OFFICE USE ONLY  
 Log No. 91568  
 Permit No. \_\_\_\_\_  
 Basin LOS  
 NOTICE OF INTENT NO. 49717

PRINT OR TYPE ONLY

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

1. OWNER **RON GREEN**  
 MAILING ADDRESS 1304 Raeline Minden, NV 89423  
 GARDNERVILLE, NV 89410  
 ADDRESS AT WELL LOCATION 2140 EAST VALLEY RD.  
 MINDEN, NV 89423

2. LOCATION SW 1/4 SE 1/4 Sec 14 T 13 N R 20 E DOUGLAS County  
 PERMIT NO. 1320-14-001-012

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	Thick-ness
OVERBURDEN		0	3	3
DG SANDS & CLAY		3	21	18
BROWN CLAY		21	87	66
DG SANDS		87	145	78
BROWN GUMMY CLAY		145	186	41
BROWN SANDS		186	209	23
COURSE DG SAMDS	XX	209	240	31

8. WELL CONSTRUCTION  
 Depth Drilled 240' Feet Depth Cased 240 Feet  
 HOLE DIAMETER (BIT SIZE)  
 From \_\_\_\_\_ To \_\_\_\_\_  
10 5/8 Inches 0 Feet 240' 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>.188</u>	<u>0</u>	<u>240</u>

Perforations:  
 Type perforation \_\_\_\_\_ **FACTORY MILL SLOT**  
 Size perforation 3X 3/32  
 From 220 feet to 240 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ 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 240 feet

9. WATER LEVEL  
 Static water level 110 feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. 25 P.S.I.  
 Water temperature COLD °F Quality GOOD

Date started 12/7, 20 03  
 Date completed 12/9, 20 03

7. WELL TEST DATE

TEST METHOD:	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bafler <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift		
G.P.M. <u>25</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 & PUMP INC.  
 (CONTRACTOR)  
 Address 20 KITKAT DRIVE  
 (CONTRACTOR)  
CARSON CITY, NV 898706  
 Nevada contractor's license number \_\_\_\_\_  
 issued by the State Contractor's Board 0055548  
 Nevada driller's license number issued by the  
 Division of Water Resources, the on-site driller 2157  
 Signed [Signature]  
 By driller performing actual drilling on site or contractor  
 Date 12/12/03