

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

office use only
Log No. 91572
Permit No.
Basin 105

1. OWNER **Rebecca Admans**
MAILING ADDRESS **175 Centennial**
Genoa NV 89411

ADDRESS AT WELL LOCATION

NOTICE OF INTENT NO 51577
175 Centennial

2. Location **NE 1/4 SE 1/4 Sec 4 T 13N R 19E**

Douglas County

PERMIT NO. **PARCEL NO. 1319-04-002-02**

SUBDIVISION NAME

| | | | | | | | | |
|--|---------|-------------|--|------------|-------|--------------|--|---|
| 3. WORK PERFORMED | | | 4. PROPOSED USE | | | 5. WELL TYPE | | |
| New Well | Replace | Recondition | <input checked="" type="checkbox"/> Domestic | Irrigation | Test | Cable | <input checked="" type="checkbox"/> Rotary | RVC |
| <input checked="" type="checkbox"/> Deepen | Abandon | Other | Municipal/Industrial | Monitor | Stock | Air | Other | <input checked="" type="checkbox"/> Mud |

6. LITHOLOGIC LOG

| Material | Water Strata | From | To | Thickness |
|------------------|--------------|------|-----|-----------|
| Boulders & sand. | | 84 | 180 | 96 |

8. WELL CONSTRUCTION

Depth Drilled **180** feet Depth Cased **180** feet

HOLE DIAMETER (BIT SIZE)

| | From | To |
|--------------|------|-----|
| 7 7/8 inches | 84 | 180 |
| inches | | |
| inches | | |

CASING SCHEDULE

| Size O.D. (Inches) | Weight/Ft. (Pounds) | Wall Thickness (Inches) | From (Feet) | To (Feet) |
|--------------------|---------------------|-------------------------|-------------|-----------|
| 6 5/8 | 12.94 | 188 | 60 | 180 |

Perforations:

| Type Perforation | Factory |
|------------------|----------------------|
| Size perforation | 3/32 x 3" |
| From | 100 feet to 120 feet |
| From | 160 feet to 180 feet |
| From | feet to feet |
| From | feet to feet |
| From | feet to feet |

Surface Seal YES No Seal Type:

Depth of Seal feet Neat Cement

 Pumped Cement Grout

 Poured Concrete Grout

Gravel Packed: Yes No

From 0 feet to feet

9. WATER LEVEL

Static water level **65** feet below land surface

Artesian flow **0** GPM **0** P.S.I.

Water Temperature **cold** Degrees F Quality

Date started **10-30 -03**

Date completed **11-3 -03**

7. WELL TEST DATA

| TEST METHOD: | Bailer | Pump | x | Air Lift |
|--------------|-------------------------------|------|---|--------------|
| G.P.M. | Draw Down (Feet Below Static) | | | Time (hours) |
| 15 | 115 | | | |

10. DRILLER'S CERTIFICATION

This well was drilled under my supervision and the report is true to the best of my knowledge.

Name **McKay Drilling, Inc.**
2290 Pioneer Drive
Reno, NV 89509

NV Contractors No. **14170**

NV Driller's Lic (on site) **2121**

Signed Steve McKay

By driller performing actual drilling on site or contractor

Date **11-11 -03**

RECEIVED
04 JAN -2 AM 11:08
WATER RESOURCES OFFICE