

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

OFFICE USE ONLY  
 Log No. 94189  
 Permit No. \_\_\_\_\_  
 Basin 107

PRINT OR TYPE ONLY  
 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. 52753

1. OWNER: Blaine Construction ADDRESS AT WELL LOCATION: 392 DAYLANE, Smith Valley, NV  
 MAILING ADDRESS: \_\_\_\_\_  
 2. LOCATION: SE 1/4 SE 1/4 Sec. 1 T. 11 N/S R. 23 E. Lyon Co County  
 PERMIT NO. N/A Issued by Water Resources Parcel No. 10-211-22 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 \_\_\_\_\_

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Sand		0	12	
Sand, Coarse		12	87	
Clay		87	113	
Gravel		113	174	
Clay Grey		174	192	
Gravel		192	208	
Clay		208	216	
Gravel		216	240	

8. WELL CONSTRUCTION  
 Depth Drilled 240 Feet Depth Cased 240 Feet  
 HOLE DIAMETER (BIT SIZE)  
 From To  
10 3/8 Inches 1 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 3/8</u>	<u>13</u>	<u>1.88</u>	<u>1</u>	<u>20</u>
<u>6 3/8</u>	<u>3.61</u>	<u>PVC</u>	<u>20</u>	<u>240</u>

Perforations:  
 Type perforation Machin Perfor  
 Size perforation 3/16 x 1 1/2 #20  
 From 200 feet to 240 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  
 Depth of Seal 60'  
 Neat Cement  
 Placement Method:  Pumped  Cement Grout  
 Poured  Concrete Grout  
 Gravel Packed:  Yes  No  
 From 60 feet to 240 feet

9. WATER LEVEL  
 Static water level 110 feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature C °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: Blaine Drilling, Inc Contractor  
 Address: P.O. 399 Contractor  
SS - NV 89429  
 Nevada contractor's license number issued by the State Contractor's Board: 0031841  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller: 1876  
 Signed [Signature]  
 By driller performing actual drilling on site or contractor  
 Date \_\_\_\_\_

Date started 9/4/04, 20\_\_\_\_\_  
 Date completed 9/15/04, 20\_\_\_\_\_  
 7. WELL TEST DATA

TEST METHOD:  Bailer  Pump  Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>35</u>	<u>35</u>	<u>2 hrs</u>