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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. 57777

1. OWNER Rick Bertucci ADDRESS AT WELL LOCATION 150 pin view est (395)  
Bonchetti  
 MAILING ADDRESS NE SW 5 Gardnerville  
 2. LOCATION 1/4 NE 1/4 Sec. 5 T. 11 N/S R. 21 E Douglas CO. County  
 PERMIT NO. NA 1121-05-000-010 Subdivision Name \_\_\_\_\_  
 Issued by Water Resources Parcel No. \_\_\_\_\_

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
Soil Cobbles		1	6	
Cobbles Gravel		6	26	
Cobble Clay		26	47	
Clay, Sands		47	96	
(Some Cabbles)				
DB		96	163	
(Granite Fractured)		163	218	

8. WELL CONSTRUCTION  
 Depth Drilled 218 Feet Depth Cased 218 Feet  
 HOLE DIAMETER (BIT SIZE)  
 From To  
10 5/8 Inches 1 Feet 60 Feet  
8 3/4 Inches 60 Feet 218 Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>MVC 51110</u>		<u>3.60</u>	<u>18</u>	<u>218</u>
<u>Steel</u>	<u>13.6</u>	<u>1.88</u>	<u>1</u>	<u>18</u>

Perforations:  
 Type perforation Machined  
 Size perforation 3/16 x 4 x 4 # nose  
 From 188 feet to 218 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

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

9. WATER LEVEL  
 Static water level 16' above ground feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. P.S.I.  
 Water temperature C °F Quality Good

Date started 9/10/04 20\_\_\_\_  
 Date completed 9/10/04 20\_\_\_\_

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>75+</u>		<u>1/4 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 Jason Drilling Inc Contractor  
 Address PO Box 559 Contractor  
28 NV 89428  
 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 9/10/04

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 01 SEP 17 AM 11:19  
 STATE ENGINEERS OFFICE