

WELL DRILLER'S REPORT

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

Log No. 95538  
 Permit No. \_\_\_\_\_  
 Basin 103  
 NOTICE OF INTENT NO. 49740

PRINT OR TYPE ONLY  
 DO NOT WRITE ON BACK

1. OWNER Troy Ualerzugl ADDRESS AT WELL LOCATION 7482 McKinley Ct Carson City, NV  
 MAILING ADDRESS \_\_\_\_\_  
 2. LOCATION SE 1/4 SW 1/4 Sec. 8 T. 17N N/S R. 23 E CARSON County  
 PERMIT NO. 9-82207  
 Issued by Water Resources \_\_\_\_\_ Parcel No. \_\_\_\_\_ 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	Thickness
DG DIRT		0	7	7
DG + BLACK CLAY		7	18	11
GRAY SANDY CLAY		18	24	6
DG + SANDY GRAY CLAY		24	150	126
LARGE BLACK GRAVEL		150	200	50

8. WELL CONSTRUCTION  
 Depth Drilled 200 Feet Depth Cased 200 Feet  
 HOLE DIAMETER (BIT SIZE)  
 From 11 Inches To 0 Feet 200 Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet

CAISING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 5/8</u>	<u>14</u>	<u>1 1/8</u>	<u>1</u>	<u>20</u>
<u>6 5/8</u>	<u>4</u>	<u>5/8</u>	<u>20</u>	<u>200</u>

Perforations:  
 Type perforation GRINDER CUT  
 Size perforation 1045" x 4"  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From 180 feet to 200 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  
 Depth of Seal 104 ft  Neat Cement  
 Placement Method:  Pumped  Concrete Grout  
 Poured  Concrete Grout  
 Gravel Packed:  Yes  No  
 From 184 feet to 200 feet

9. WATER LEVEL  
 Static water level 38 feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature COLD °F Quality CLEAR

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.  
**BLAIN DRILLING & PUMP CO. INC.**  
 Name \_\_\_\_\_ P.O. Box 1255  
 Address Carson City, NV 89702  
 Contractor \_\_\_\_\_

Date started 20 NOV 20 04  
 Date completed 22 NOV 20 04

7. WELL TEST DATA

TEST METHOD:  Bailer  Pump  Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>10-12</u> <u>22-25</u>		<u>1.5</u>

Nevada contractor's license number issued by the State Contractor's Board 46498  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2167  
 Signed Jack Notson  
 By driller performing actual drilling on site or contractor  
 Date \_\_\_\_\_

RECEIVED  
 04 DEC - 5 PM 3:24  
 STATE ENGINEERS OFFICE