

COPIES TO

- DIVISION OF WATER RESOURCES
- CLIENT'S COPY
- WELL DRILLER'S COPY

STATE OF NEVADA

DIVISION OF WATER RESOURCES

WELL DRILLER'S REPORT

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

OFFICE USE ONLY

Log No. 97781  
 Permit No. \_\_\_\_\_  
 Basin 105

PRINT OR TYPE ONLY

1. OWNER BETSY KOTALIC ADDRESS AT WELL LOCATION 2140 FISH SPRINGS RD  
 MAILING ADDRESS 2128 MEADOW VIEW GARDNERVILLE, NV 89410  
SAN MATEO, CA 94401

2. LOCATION NW 1/4 SE 1/4 Sec 6 T 12 N R 21 E DOUGLAS County  
 PERMIT NO. SW NE 1221-060-019-019  
 Issued by Water Resources Parcel NO/DI 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 MUD

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
COBBLES AND CLAY		0	6	6
GRAVELS		6	21	15
BROWN CLAY AND SANDS		21	36	15
DG SANDS		36	59	23
BROWN CLAY		59	125	66
HARD SANDSTONE	XX	125	178	53
BROWN CLAY		178	205	27
SMALL SOFT SAND	XX	205	220	15

8. WELL CONSTRUCTION  
 Depth Drilled 220' Feet Depth Cased 220' Feet  
 HOLE DIAMETER (BIT SIZE)  
 From 10 3/4 Inches To 0 Feet 220 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>+2</u>	<u>20</u>
<u>sdr21 6/58</u>	<u>4.06</u>	<u>.216</u>	<u>20</u>	<u>220</u>

Performations:  
 Type perforation \_\_\_\_\_  
 Size perforation SAW CUT  
3 X 3/32  
 From 160 feet to 220 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 220 feet

9. WATER LEVEL  
 Static water level \_\_\_\_\_ 95 feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. 25 P.S.I.  
 Water temperature COLD °F Quality GOOD

Date started 8/16, 20 05  
 Date completed 8/19, 20 05

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  
 (CONTRACTOR)  
 Address 20 KIT KAT DRIVE  
 (CONTRACTOR)  
CARSON CITY, NV 89706  
 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 Rick Crane  
 By driller performing actual drilling on site or contractor  
 Date 8/24/05

7. WELL TEST DATE

TEST METHOD:	Bailer	Pump	Air Lift
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
G.P.M.	Draw Down (Feet Below Static)		Time (Hours)
<u>25</u>	<u>35</u>		<u>3 HRS</u>

RECEIVED  
 05 AUG 31 AM 11:23  
 STATE ENGINEERS OFFICE