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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. 24191

1. OWNER Sunshine Coast ADDRESS AT WELL LOCATION Lot #106 Santa Sophia Drive  
 MAILING ADDRESS \_\_\_\_\_ 70 Santa Sophia Drive  
 2. LOCATION NW 1/4 SE 1/4 Sec 27 T. 11 N/S R. 23 E. Lyon Douglas County  
 PERMIT NO. \_\_\_\_\_ Parcel No. 009.231-06 Subdivision Name Smith Vista  
 Issued by Water Resources \_\_\_\_\_

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	20	20
BROWN CLAY-DG		20	62	42
DG	<del>XXXX</del>	62	68	6
BLACK SANDY CLAY		68	90	22
MEDIUM GRAVEL	<del>XXXX</del>	90	102	12
GRAY MUSHY CLAY		102	126	24
BROWN SAND		126	135	9
BR CLAY+GRAVEL	<del>XXXX</del>	135	158	23
GRAVEL	<del>XXXX</del>	158	180	22

8. WELL CONSTRUCTION  
 Depth Drilled 180 Feet Depth Cased 180 Feet

HOLE DIAMETER (BIT SIZE)  
 From 11 Inches To 180 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>14</u>	<u>.188</u>	<u>+1</u>	<u>20</u>
<u>6 5/8</u>	<u>4</u>	<u>SDR 21</u>	<u>20</u>	<u>180</u>

Perforations:  
 Type perforation GRINDER CUT  
 Size perforation 1.045" x 4"  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From 160 feet to 180 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  
 Depth of Seal 53 ft  Neat Cement  
 Placement Method:  Pumped  Concrete Grout  
 Poured

Gravel Packed:  Yes  No  
 From 53 feet to 180 feet

9. WATER LEVEL  
 Static water level 27 feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature COLD °F Quality CLEAR

Date started 12 OCT 05, 20\_\_\_\_  
 Date completed 12 OCT 05, 20\_\_\_\_

7. WELL TEST DATA

TEST METHOD:  Bailer  Pump  Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>25 ft</u>		<u>2.0</u>

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 \_\_\_\_\_

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 Dotson  
 By driller performing actual drilling on site or contractor  
 Date 17 OCT 05