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

OFFICE USE ONLY
Log No. 1046651
Permit No.
Basin 0089

PRINT OR TYPE ONLY
DO 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. 61003

1. OWNER ANNE PARKER
MAILING ADDRESS
ADDRESS AT WELL LOCATION 18685 LAKE VISTA RD
WASHOE VALLEY, NV 89704
Subdivision Name: County: ~~DOUGLAS~~ Washoe

2. LOCATION ~~SW ¼~~ ~~SW~~ ¼ Sec ~~11~~ NE NW 14 T 16N N/S R 19 E
Latitude 39.25771°N
Longitude 119.82114°W
UTM E N
☐ NAD 27 ☒ NAD 83/WGS 84
PERMIT/WAIVER No. 055-081-93
Issued by Water Resources Parcel No.

3. WORKED PERFORMED
☒ New Well ☐ Replace ☐ Recondition ☐ Deepen ☐ 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	Thickness
BROWN OVERBURDEN		0	6	6
BROWN DG SAND		6	24	18
COURSE SILTY SANDS		24	93	69
GRAY CLAY	X	93	137	44
DG SANDS	XX	137	160	23

N 39.257815
W 119.820138 NAD27

Date started: 10/13 20 07
Date completed: 10/15 20 07

9. WELL CONSTRUCTION
Depth Drilled 160' Feet Depth Cased 160' Feet

HOLE DIAMETER (BIT SIZE)

		From	To
11 Inches		0 Feet	160 Feet
Inches		Feet	Feet
Inches		Feet	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	13.03	.188	+2	160

Perforations:
Type of perforation SAW CUT
Size of perforation 3 X 3/32
From 130 feet to 160 feet
From feet to feet
From feet to feet
From feet to feet
From feet to feet

Annular Seal: ☐ Yes ☐ No
☒ Neat Cement 0 to 100 ☒ Pumped ☐ Poured
☐ Cement Grout to ☐ Pumped ☐ Poured
☐ Concrete Grout to ☐ Pumped ☐ Poured
☐ ≥30% Bentonite Grout to ☐ Pumped ☐ Poured
Gravel Pack: ☒ Yes ☐ No 100 to 160 ☐ Pumped ☒ Poured
Type: PEAT GRAVEL
Bentonite Chips: ☐ Yes ☐ No to ☐ Pumped ☐ Poured
Type:

7. Water Level
Static water level: 2' feet below land surface
Artesian Flow: G.P.M. P.S.I.
Water Temperature: COLD °F
Quality: GOOD

8. WELL TEST DATA
TEST METHOD: ☐ Bailer ☐ Pump ☒ Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
30	25	3 HRS

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 AND PUMPS INC
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* 1905
Signed
By driller performing actual drilling on-site or contractor
Date 10/17/2007

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(Rev. 05-08)

USE ADDITIONAL SHEETS IF NECESSARY