

Log No. ....  
Permit No. ....  
Basin **105**

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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. **LE01917**

1. OWNER **Douglas Co.** ADDRESS AT WELL LOCATION **N. Valley Douglas Co Effluent Storage Res. NV**  
MAILING ADDRESS  
2. LOCATION **NW 1/4 NE 1/4 Sec 20 T 14 N S R 20 E Douglas County**  
PERMIT NO. **NEV 00025** Parcel No. **1420-29-001-003** Subdivision Name **39° 03.39' N 119° 45.35' W 1/4 S 1/4**

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 **auger**

6. LITHOLOGIC LOG **NW 1/4 3**

Material	Water Strata	From	To	Thickness
<b>brown sandy silt</b>		<b>0</b>	<b>12</b>	
<b>brown sand</b>		<b>12</b>	<b>20</b>	
<b>dark gray sand</b>		<b>20</b>	<b>30</b>	

**N39.060935**  
**W 119.758724 N4027**

8. WELL CONSTRUCTION  
Depth Drilled **30** Feet Depth Cased **30** Feet  
HOLE DIAMETER (BIT SIZE)  
From **0** Feet To **30** Feet  
Inches ..... Feet ..... Feet  
Inches ..... Feet ..... Feet  
CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<b>2</b>	<b>PVC</b>	<b>sch 80</b>	<b>0</b>	<b>30</b>

Perforations:  
Type perforation **Fac**  
Size perforation **0.10**  
From **5** feet to **25** feet  
From ..... feet to ..... feet

Surface Seal:  Yes  No Seal Type:  Neat Cement  
Depth of Seal **4'**  Cement Grout  
Placement Method:  Pumped  Concrete Grout  
 Poured

Gravel Packed:  Yes  No  
From **30** feet to **4** feet

Date started **1/15**, 20**08**  
Date completed **1/15**, 20**08**

7. WELL TEST DATA

TEST METHOD:  Bailer  Pump  Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<b>N/A</b>	<b>N/A</b>	<b>N/A</b>

9. WATER LEVEL  
Static water level **11'9"** feet below land surface  
Artesian flow **N/A** G.P.M. **N/A** P.S.I.  
Water temperature **cold** °F Quality **N/A**

10. DRILLER'S CERTIFICATION  
This well was drilled under my supervision and the report is true to the best of my knowledge.  
Name **Andresen Drilling** Contractor  
Address **11035 Belford rd. Reno, NV 89509** Contractor  
Nevada contractor's license number issued by the State Contractor's Board **34525**  
Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1028**  
Signed **[Signature]**  
By driller performing actual drilling on site or contractor  
Date **1/31/08**