

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

OFFICE USE ONLY
Log No. 120057
Permit No. _____
Basin No. 0510

PRINT OR TYPE IN BLACK INK 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. 71162
WELL NAME (if applicable): MW-1

1. OWNER/CLIENT NAME Jasbir Chahal - Highland Stores
MAILING ADDRESS 5690 Sun Valley Blvd.
Sun Valley, NV 89433
DETAILED ADDRESS AT WELL LOCATION Facility ID: 4-000755
5690 Sun Valley Blvd. Sun Valley, NV
Subdivision Name: _____ County: Washoe

2. PLS LOCATION NE 1/4 SW 1/4 18 Sec 20 N/S 20 E Latitude 39.599796 UTM E NAD 27
PERMIT/WAIVER NO. 085-261-41 Longitude -119.780289 UTM N NAD 83/WGS 84
Issued by Water Resources Current Parcel No.

3. WORKED PERFORMED
 New Well Deepen: Orig WL# _____
 Replacement: Original well log # _____
 Recondition: Original well log # _____

4. PROPOSED USE
 Domestic Irrigation Monitor
 Mining / Dewater Com / Ind Stock
 Test / Other Mun / QM Rec Other

5. WELL TYPE
 Auger Rotary RVC
 Air Mud Sonic
 Other

6. LITHOLOGIC LOG					
Material Encountered	Lost Circ.	Water Strata	From	To	Thickness
Clay Stiff			0	20	20
Clay Stiff Clay			20	50	30
Semi-silty Clay Stiff			50	80	30
Silty sandy fine grains			80	90	10

9. WELL CONSTRUCTION
Depth Drilled: 90 Feet Depth Cased: 90 Feet
HOLE DIAMETER (BIT SIZE)

From	To
8	0

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>2</u>		<u>Sch 40</u>	<u>0</u>	<u>90</u>

PERFORATIONS:
Type of perforation: Slot
Size of perforation: 0.01
From 50 Feet To 90 Feet
From _____ Feet To _____ Feet
From _____ Feet To _____ Feet

ANNULAR MATERIALS

<input type="checkbox"/> Sanitary Seal to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> Neat Cement to _____	<input checked="" type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input checked="" type="checkbox"/> Cement Grout <u>0</u> to <u>44</u>	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> Concrete Grout to _____	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
<input checked="" type="checkbox"/> Bentonite Chips <u>44</u> to <u>47</u>	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> Bentonite Grout to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> 15 % <input type="checkbox"/> 20 % <input type="checkbox"/> Other, explain: _____		
<input type="checkbox"/> Gravel Pack [> 0.2 in.] to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input checked="" type="checkbox"/> Sand Pack [< 0.2 in.] <u>47</u> to <u>90</u>	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
<input type="checkbox"/> Other, explain: _____ to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured

7. WATER QUALITIES
Static water level: 78 Feet below land surface
Artesian Flow: _____ G.P.M. P.S.I.
Water Temperature: _____ ° Fahrenheit
Water Quality: _____

8. WELL TEST DATA

Test Method:	G.P.M.	Draw Down (Feet Below Static)	Recorded Time (Hours)
<input type="checkbox"/> Bailor <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift			

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision. This report is true to the best of my knowledge.
Name Cascade Drilling, L.P. Contractor
Address 3000 Duluth St West Sacramento, CA 95691 Contractor
Nevada contractor's license number as issued by the State Contractor's Board: 73966
Nevada well driller's license number as issued by the Nevada Division of Water Resources (on-site driller): M-2467
Signed: _____
By driller performing actual drilling on site or contractor
Date: 25-Apr-14