

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

OFFICE USE ONLY
Log No. 120928
Permit No. _____
Basin No. 105

**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. 72072
WELL NAME (if applicable): _____

1. OWNER/CLIENT NAME JOHN & JACELYN FISHER
MAILING ADDRESS 1320 N. HWY 395
GARDNERVILLE, NV 89410

DETAILED ADDRESS AT WELL LOCATION 3669 Cherokee Dr
CARSON CITY, NV 89704
Subdivision Name: _____ County: Douglas

2. PLS LOCATION NE 1/4 SE 1/4 1 Sec 14 N/S 19 E
PERMIT/WAIVER NO. DOM-14-38 1419-01-701-025
Issued by Water Resources Current Parcel No.

Latitude 39.104157°N UTM E NAD 27
Longitude 119.789301°W UTM N NAD 83/WGS 84

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

5. WELL TYPE
 Auger Rotary RVC
 Air Mud Sonic
 Other

6. LITHOLOGIC LOG

Material Encountered	Lost Circ.	Water Strata	From	To
OVER BURDEN			0	3
COURSE DG SANDS			0	65
BROWN CLAY			65	95
DG SANDS			95	168
SILTY SANDS			168	175
DG SANDS AND GRAVELS	XXX		175	240

9. INSTRUCTION
Depth Drilled: 240 Feet Depth Cased: 240 Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To
<u>11 1/2</u>	<u>0</u>	<u>240</u>

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>6 5/8</u>	<u>4.26</u>	<u>.216</u>	<u>20</u>	<u>240</u>
<u>SDR 17</u>				

ANNULAR MATERIALS

Sanitary Seal Yes No

Neat Cement _____ to _____ Pumped Poured

Cement Grout 0 to 55 Pumped Poured

Concrete Grout _____ to _____ Pumped Poured

Bentonite Chips _____ to _____ Pumped Poured

Gravel Pack [> 0.2 in.] 55 to 240 Pumped Poured

Sand Pack [< 0.2 in.] _____ to _____ Pumped Poured

Other, explain: _____ to _____ Pumped Poured

RECEIVED
2014 OCT -7 AM 11:07
STATE ENGINEERS OFFICE

Handwritten:
Nad 27
39.104157°N
119.789301°W

PERFORATIONS:

Type of perforation: SAW CUT

Size of perforation: 3 X 3/32

From 200 Feet To 240 Feet

From _____ Feet To _____ Feet

From _____ Feet To _____ Feet

From _____ Feet To _____ Feet

Date started: 29-Aug, 20 14
Date completed: 2-Oct, 20 14

7. WATER QUALITIES

Static water level: 95 Feet below land surface

Artesian Flow: _____ G.P.M. _____ P.S.I.

Water Temperature: COLD ° Fahrenheit

Water Quality: GOOD

10. DRILLER'S CERTIFICATION

This well was drilled under my supervision. This report is true to the best of my knowledge.

Name CAPITAL CITY WELL DRILLING AND PUMP SERVICE INC.
Contractor

Address 20 KIT KAT DRIVE CARSON CITY NV 89706
Contractor

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 checked="" type="checkbox"/> Air Lift	<u>25</u>	<u>45</u>	<u>3 HRS</u>

Nevada contractor's license number as issued by the State Contractor's Board: 0055548

Nevada well driller's license number as issued by the Nevada Division of Water Resources (on-site driller): 1905

Signed: Michael Black
By driller performing actual drilling on site or contractor

Date: 9/15/2014