

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

OFFICE USE ONLY
Log No. 120948
Permit No. _____
Basin No. 104

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. 72194
WELL NAME (if applicable): _____

1. OWNER/CLIENT NAME Dyke Kraftman
MAILING ADDRESS 4830 East Lake Blvd
NW

DETAILED ADDRESS AT WELL LOCATION 4744 Jumbo Grade
Subdivision Name: _____ County: Washoe

2. PLS LOCATION S 1/4 Sec 16 N/S 20 E
PERMIT/WAIVER NO. 000-35-11
Issued by Water Resources Current Parcel No.

Latitude 39° 16.900 UTM E NAD 27
Longitude 119.44 861 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
 Rotary RVC
 Air Mud Sonic
 Other

6. LITHOLOGIC LOG

Material Encountered	Lost Circ.	Water Strata	From	To	Thickness
Sand & Gravels			0	34	34
Cobbles with streaks of clay			34	110	
Clay & DG			110	165	76
Black & white granite			165	299	134

9. WELL CONSTRUCTION

Depth Drilled: 299 Feet Depth Cased: 299 Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet	Feet
10 5/8	0	215		
9 7/8	215	299		

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8		.188	72	299

PERFORATIONS:

Type of perforation: FACTORY
Size of perforation: 1/16

From	To	Feet	Feet
199	219		
239	259		
279	299		

ANNULAR MATERIALS

<input checked="" type="checkbox"/> Sanitary Seal <u>3</u> to <u>105</u>	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> Neat Cement _____ to _____	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
<input checked="" type="checkbox"/> Cement Grout <u>3</u> to <u>105</u>	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> Concrete Grout _____ to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> Bentonite Chips _____ to _____	<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 checked="" type="checkbox"/> Gravel Pack [> 0.2 in.] <u>105</u> to <u>299</u>	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
<input type="checkbox"/> Sand Pack [< 0.2 in.] _____ to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> Other, explain: _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured

Date started: 8-2-14, 20
Date completed: 8-6-14, 20

7. WATER QUALITIES
Static water level: _____ Feet below land surface
Artesian Flow: N/A G.P.M. 25+ P.S.I.
Water Temperature: Cold ° Fahrenheit
Water Quality: Clear

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision. This report is true to the best of my knowledge.
BLAIN DRILLING & PUMP CO INC.
Name: _____
Address: P.O. Box 1255 Carson City, NV 89702
Contractor

8. WELL TEST DATA

Test Method:	Bailer	Pump	Air Lift	G.P.M.	Draw Down (Feet Below Static)	Recorded Time (Hours)
<u>200 FT</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>25+</u>		<u>3</u>

Nevada contractor's license number as issued by the State Contractor's Board: 46499A
Nevada well driller's license number as issued by the Nevada Division of Water Resources (on-site driller): 2321
Signed: C. Robinson
By driller performing actual drilling on site or contractor
Date: 8-7-14