

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

OFFICE USE ONLY
Log No. 1722694
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. 73121
WELL NAME (if applicable): _____

1. OWNER/CLIENT NAME CHRISTOPHER MAHONEY
MAILING ADDRESS 151 CORDLESS LANE
CLOVERDALE CA

DETAILED ADDRESS AT WELL LOCATION 2613 SQUIRES
MINDEN, NV 89423
Subdivision Name: _____ County: Douglas

2. PLS LOCATION SE ¼ SE ¼ 34 Sec 14 N/S 20 E
PERMIT/WAIVER NO. DOM-15-30 1420-34-811-032
Issued by Water Resources Current Parcel No.

Latitude 39.027618°N UTM E _____ NAD 27
Longitude 119.719135°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
 Irrigation Monitor
 Com / Ind Stock
 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	4
DG SANDS			4	75
BROWN CLAY			75	132
SILTY SANDS			132	145
COURSE DG SANDS			145	180
BROWN CLAY			180	205
FRACTURED DG SANDS		XXX	205	260
<i>Head 27 39.027618°N 119.719135°W</i>				

9. INSTRUCTION
Depth Drilled: 260 Feet Depth Cased: 260 Feet

HOLE DIAMETER (BIT SIZE)			
	From	To	
10 5/8	Inches 0	Feet 260	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	20
6 5/8	4.26	.216	20	260
SDR 21				

ANNULAR MATERIALS

Sanitary Seal Yes No

<input type="checkbox"/> Neat Cement	to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input checked="" type="checkbox"/> Cement Grout	0 to 75	<input type="checkbox"/> Pumped	<input checked="" 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 checked="" type="checkbox"/> Gravel Pack [> 0.2 in.]	75 to 260	<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:	to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured

Date started: 2-Jun 2015
Date completed: 4-Jun 2015

PERFORATIONS:
Type of perforation: FACTORY MILL SLOT
Size of perforation: 0.032
From 220 Feet To 260 Feet
From _____ Feet To _____ Feet
From _____ Feet To _____ Feet
From _____ Feet To _____ Feet

7. WATER QUALITIES
Static water level: 95 Feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: 52° ° 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.

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>70</u>	<u>3 HRS</u>

Name CAPITAL CITY WELL DRILLING AND PUMP SERVICE INC.
Address 20 KIT KAT DRIVE CARSON CITY, NV 89705
Nevada contractor's license number as issued by the State Contractor's Board: 0055348
Nevada well driller's license number as issued by the Nevada Division of Water Resources (on-site driller): 1995
Signed: [Signature]
Date: 6/21/2015