

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

OFFICE USE ONLY  
Log No. 124138  
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. 73305  
WELL NAME (if applicable): \_\_\_\_\_

1. OWNER/CLIENT NAME STEVE GRAVES  
MAILING ADDRESS 2731 HWY 395 N.  
MINDEN, NV 89423

DETAILED ADDRESS AT WELL LOCATION 2731 HWY 395 N.  
MINDEN, NV 89423

2. PLS LOCATION NE 1/4 NE 34 1/4 31 Sec 14 N/S 20 E  
PERMIT/WAIVER NO. 1420-31-000-007  
Issued by Water Resources Current Parcel No.

Subdivision Name: \_\_\_\_\_ County: Douglas  
Latitude 39.03746°N UTM E  NAD 27  
Longitude 119.775481°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

8. LITHOLOGIC LOG				
Material Encountered	Lost Circ.	Water Strata	From	To
OVER BURDEN			0	3
BROWN HARD PAN			3	8
DG SANDS			8	125
BROWN CLAY			125	183
GRAY SILTY SANDS			183	220
GRAY CLAY			220	260
DG SANDS AND GRAVELS			260	280
MEDIUM DG SANDS		XXX	280	340
NAD 27 39.037492 119.777469				

9. INSTRUCTION				
Depth Drilled:	340'	Feet	Depth Cased:	340'
HOLE DIAMETER (BIT SIZE)				
	From	To		
11	Inches	0	Feet	340'
	Inches		Feet	
	Inches		Feet	

CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	13.03	.188	2	340

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 _____ 100	<input checked="" 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 checked="" type="checkbox"/> Gravel Pack [ > 0.2 in. ]	_____ 100 _____ to _____ 340	<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

PERFORATIONS:  
Type of perforation: FACTORY MILL SLOT  
Size of perforation: 3 X 3/32

From	<u>280</u>	Feet	To	<u>340</u>	Feet
From	_____	Feet	To	_____	Feet
From	_____	Feet	To	_____	Feet
From	_____	Feet	To	_____	Feet

Date started: 17-Dec-Nov, 20 15  
Date completed: 20-Nov, 20 15

7. WATER QUALITIES  
Static water level: 35 Feet below land surface  
Artesian Flow: \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
Water Temperature: 47° ° 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.  
Address 20 KIT KAT DRIVE CARSON CITY, NV 89706

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>40</u>	<u>85</u>	<u>5 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): \_\_\_\_\_  
Signed: \_\_\_\_\_  
Date: 12/4/2015