

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

OFFICE USE ONLY
Log No. 124946
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. 73323
WELL NAME (if applicable): _____

1. OWNER/CLIENT NAME MARK AND SHIRLEY HOLMES
MAILING ADDRESS 759 PARHAM COURT
GARDNERVILLE, NV 89460

DETAILED ADDRESS AT WELL LOCATION 759 PARHAM COURT
GARDNERVILLE, NV 89460

2. PLS LOCATION SE 1/4 NE SE 1/4 36 Sec 12 N/S 19 E
PERMIT/WAIVER NO. 1219-36-002-005
Issued by Water Resources Current Parcel No.

Subdivision Name: _____ County: Douglas
Latitude 38.85829°N UTM E _____ NAD 27
Longitude 119.792253°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 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	6
DG DOULDERS AND GRAVELS			6	85
DG SANDS AND GRAVELS			85	145
BROWN DG SANDS			145	190
FRACTURED DG GRANITE		XXX	190	240

9. INSTRUCTION

Depth Drilled: 240 Feet Depth Cased: 240 Feet

HOLE DIAMETER (BIT SIZE)

From	To
<u>11</u> Inches	<u>0</u> Feet <u>240</u> Feet
_____ Inches	_____ Feet _____ Feet
_____ Inches	_____ Feet _____ Feet

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 21</u>				

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 <u>0</u> to <u>100</u>	<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.] <u>100</u> to <u>240</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: _____ to _____	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured

Date started: 28-Mar _____, _____, _____
Date completed: 1-Apr _____, _____, _____

PERFORATIONS:

Type of perforation: FACTORY MILL SLOT
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

7. WATER QUALITIES
Static water level: 85 Feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: 56 ° 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:	Bailer	Pump	Air Lift
G.P.M.		Draw Down (Feet Below Static)	Recorded Time (Hours)
<u>25+</u>		<u>75</u>	<u>3 HOURS</u>
		<u>NAD 27</u>	
		<u>38.85829</u>	
		<u>119.792253</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: [Signature]
Driller performing actual drilling on site or contractor
Date: 4/8/2016