

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

OFFICE USE ONLY  
 Log No. 125821  
 Permit No. \_\_\_\_\_  
 Basin 105

PRINT OR TYPE ONLY

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. 75915

1. OWNER **Frank and Carol Danihel**  
 MAILING ADDRESS **2637 Fuller Ave**  
SW **Minden NV 89423**  
 ADDRESS AT WELL LOCATION **2637 Fuller Ave**  
**Minden NV 89423**  
 Subdivision Name: \_\_\_\_\_ County: **Douglas**  
 2. LOCATION **NE 1/4 Sec 34 T14 N/S R20E**  
 Latitude **39.029601** UTM E  NAD 27  
 Longitude **-119.723765** N  NAD 83/WGS 84  
 PERMIT/WAIVER NO. **1420-34-810-003** Parcel No. \_\_\_\_\_  
 Issued by Water Resources

3. WORK PERFORMED  
 New Well  Replace  Recondition  
 Deepen  Other \_\_\_\_\_  
 4. PROPOSED USE  
 Domestic  Irrigation  Test  
 Municipal/Industrial  Monitor  Stock  
 5. WELL TYPE  
 Cable  Rotary  RVC  
 Air  Other **Mud**

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<b>Black Green Volcanic</b>		105	112	
<b>Fracture Rock</b>	X	112	117	
<b>Gray, multicolor volcanics</b>		117	119	
<b>Volcanic Layer</b>		119	134	
<b>Fracture Volcanic</b>	X	134	144	
<b>Gravel, multicolor volcanics</b>		144	155	
<b>Clay Layer</b>	X	155	184	
<b>Soft Volcanic</b>		184	186	
<b>Sandy Clay</b>		186	210	

9. WELL CONSTRUCTION  
 Depth Drilled **210** Feet Depth Cased **210** Feet  
 HOLE DIAMETER (BIT SIZE)  
 From **6 1/8** Inches **105** Feet **210** Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 CASING SCHEDULE  

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<b>5</b>	<b>10.79</b>	<b>.188</b>	<b>90</b>	<b>210</b>

Perforations:  
 Type of perforation **Factory**  
 Size of perforation **.060 Double perf.**  
 From **210** feet to **190** feet  
 From **170** feet to **150** feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 Annular Seal:  Yes  No  
 Neat Cement \_\_\_\_\_ to \_\_\_\_\_  Pumped  Poured  
 Cement Grout \_\_\_\_\_ to \_\_\_\_\_  Pumped  Poured  
 Concrete Grout \_\_\_\_\_ to \_\_\_\_\_  Pumped  Poured  
 ≥30% Bentonite Grout \_\_\_\_\_ to \_\_\_\_\_  Pumped  Poured  
 Gravel Pack:  Yes  No \_\_\_\_\_ to \_\_\_\_\_  Pumped  Poured  
 Type: \_\_\_\_\_  
 Bentonite Chips:  Yes  No \_\_\_\_\_ to \_\_\_\_\_  Pumped  Poured  
 Type: \_\_\_\_\_

Date started: **07/14**, 20 **16**  
 Date completed: **07/15**, 20 **16**

7. Water Level  
 Static water level: **85'** feet below land surface  
 Artesian Flow: \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water Temperature: **58** °F  
 Quality: **not tested**

8. WELL TEST DATA

TEST METHOD:	TEST METHOD:		Time (Hours)
	G.P.M.	Draw Down (Feet Below Static)	
<b>Air</b>	<b>37.5</b>	<b>NAD 27</b>	<b>2</b>
		<b>39.029692</b>	
		<b>119.722755</b>	

Bailer  Pump  Air Lift

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.  
 Name **Bruce MacKay Pump & Well Service, Inc.**  
 (CONTRACTOR)  
 Address **1600 Mt. Rose Hwy**  
 (CONTRACTOR)  
**Reno, NV 89511**  
 Nevada contractor's license number issued by the State Contractor's Board **23096**  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **2326**  
 Signed *Bruce MacKay*  
 By driller performing actual drilling on site or contractor  
 Date **07/26/16**

*Deepening unknown well log*