COPIES TO
- DIVISION OF WATER RESOURCES
- CLIENT'S COPY
- WELL DRILLER'S COPY

PRINT OR TYPE ONLY

STATE OF NEVADA

DIVISION OF WATER RESOURCES

WELL DRILLER'S REPORT

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

OFFICE USE ONLY
Log No. 83094
Permit No.
Basin 105

NOTICE OF INTENT NO. 45841

1. OWNER SINCON HOMES & DEVELOPMENT
MAILING ADDRESS GARDNERVILLE , NV 89410
ADDRESS AT WELL LOCATION TOP OF JOHNSON LANE
MIDEN , NV 89423

2. LOCATION NW ¼ SW ¼ Sec 35 T 14 N R 20 E DOUGLAS County
PERMIT NO. (Issued by Water Resources) 1420-35-301-001 (Parcel No.) SKYRIDGE SUBDIVISION (Subdivision Name)

3. WORK PERFORMED
☐ New Well ☐ Replace ☐ Recondition
☐ Deepen ☒ Abandon ☐ Other

4. PROPOSED USE
☐ Domestic ☒ Irrigation ☐ Test
☐ Municipal/Industrial ☐ Monitor ☐ Stock

5. WELL TYPE
☐ Cable ☐ Rotary ☐ RVC
☐ Air ☐ Other N/A

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
RIGGED OVER WELL				
AND CLEANED OUT TO				
BOTTOM. FOUND				
STEEL DEBRIS IN IT 105				
PLACED TRIMMING				
2" PIPE TO BOTTOM				
& PRESSURE PUMPED				
A SIX SACK NEAT				
CEMENT TO SURFACE				
HAD A FALL BACK OF				
15' AND TOP OFF WITH				
A CEMENT GROUT				

8. WELL CONSTRUCTION
Depth Drilled 180 N/A Feet Depth Cased 180 N/A Feet

HOLE DIAMETER (BIT SIZE)

	From	To
N/A Inches	Feet	Feet
Inches	Feet	Feet
Inches	Feet	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8 5/8	16.34	..188	0	180

Perforations:
Type perforation N/A
Size perforation N/A
From N/A feet to feet
From feet to feet
From feet to feet
From feet to feet
From feet to feet

Surface Seal: ☐ Yes ☐ No Seal Type:
Depth of Seal N/A ☐ Neat Cement
Placement Method: ☐ Pumped ☐ Cement Grout
☐ Poured ☐ Concrete Grout
Gravel Packed: ☐ Yes ☐ No
From N/A feet to N/A feet

9. WATER LEVEL
Static water level 190 feet below land surface
Artesian flow G.P.M N/A P.S.I
Water temperature N/A °F Quality N/A

Date started 2/3 , 20 01
Date completed 2/6 , 20 01

7. WELL TEST DATE
TEST METHOD: ☐ Bailer ☐ Pump ☐ Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
N/A	N/A	N/A

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name CAPITAL CITY WELL DRILLING (CONTRACTOR)
Address 20 KIT KAT DRIVE (CONTRACTOR)
CARSON CITY , NV 89706
Nevada contractor's license number issued by the State Contractor's Board 41775
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1905
Signed Michael L Hack
By driller performing actual drilling on site or contractor
Date 2/6/01