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**WELL DRILLER'S REPORT**  
 Please complete this form in its entirety in  
 accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. 49377

1. OWNER Greg Rooney ADDRESS AT WELL LOCATION \_\_\_\_\_  
 MAILING ADDRESS \_\_\_\_\_ 256 ROAN  
GARDNERVILLE, NV  
 2. LOCATION NW 1/4 NE 1/4 Sec 24 T 12 N/S R 20 E DOUGLAS County  
 PERMIT NO. 1220-24-501033 Issued by Water Resources Parcel No. \_\_\_\_\_ 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 \_\_\_\_\_

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>BROWN CLAY</u>		<u>0</u>	<u>45</u>	<u>45</u>
<u>ROCK - COBBLES</u>		<u>45</u>	<u>70</u>	<u>25</u>
<u>BROWN SANDY CLAY</u>		<u>70</u>	<u>100</u>	<u>30</u>
<u>ROCK - COBBLES</u>		<u>100</u>	<u>160</u>	<u>60</u>
<u>FRACTURED ROCK - GRAVEL</u>		<u>160</u>	<u>200</u>	<u>40</u>

8. WELL CONSTRUCTION  
 Depth Drilled 200 Feet Depth Cased 200 Feet  
 HOLE DIAMETER (BIT SIZE)  
 From To  
10 5/8 Inches 0 Feet 130 Feet  
9 7/8 Inches 130 Feet 200 Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 3/8</u>	<u>14</u>	<u>.188</u>	<u>+1</u>	<u>200</u>

Perforations:  
 Type perforation Factory milled  
 Size perforation 3/32" X 3"  
 From 180 feet to 200 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  
 Depth of Seal 58 ft  Neat Cement  
 Placement Method:  Pumped  Cement Grout  
 Poured  Concrete Grout  
 Gravel Packed:  Yes  No  
 From 58 feet to 200 feet

9. WATER LEVEL  
 Static water level 104 feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature COLD °F Quality CLEAR

Date started 23 JAN 03, 20\_\_  
 Date completed 27 JAN 03, 20\_\_

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	<u>18-20</u>		<u>1.0</u>

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.  
Blain Drilling & Pump Co.  
 Name P.O. Box 1255  
Carson City, NV 89702  
 Address \_\_\_\_\_ Contractor  
 Nevada contractor's license number issued by the State Contractor's Board 46498  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2167  
 Signed Jack Dotson  
 By driller performing actual drilling on site or contractor  
 Date \_\_\_\_\_

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 03 FEB - 7 PM 4:06  
 STATE ENGINEERS OFFICE