PETERS'
DRILLING &
PUMP SERVICE

P.O. Box 1546
Grass Valley, CA 95945
Phone (530) 273-8136 FAX (530) 273-1213

WELL PRODUCTION REPORT

CUSTOMER:

Customer: Elisa Hebb
Address: 14041 Loma Rica Dr.
Grass Valley, CA 95945

Property Address: 14041 Loma Rica Dr.
City: Grass Valley
County: Nevada
Assessor's Parcel#: 006 - 880 - 004

WELL TEST INFORMATION:

Date of Test: 8/6/2025
Casing Size: 6" ABS
Pressure Tank: 86 Gallon
Pipe Down Well: 1" Poly
Pump HP and Type: 1 HP
Depth of Well: Not Measured
Holding Tank: None
Holding Tank Pump: None
Safety Controls: None
Beginning Static Level: Not Measured
Ending Static Level: Not Measured
Filter System: Calcite, 10" Big Blue
Lab Test(s):
Water Potability: Taken
Water Mineral: None Ordered

Time:	Yield:
12:30	12.0
12:45	12.0
1:00	12.0
1:15	12.0
1:30	12.0
1:45	12.0
2:00	12.0
2:15	12.0
2:30	12.0
2:45	12.0
3:00	12.0
3:15	12.0
3:30	12.0

Sustained Well Yield: 12.0+ Gallons Per Minute

Other comments: Well makes 720+ gallons per hour, 17,280+ gallons per day. Average gallons used per person, per day is 70-100.

Well tested for (hours): 3 Hours
Tested by: Dave Wood
Technician: Dave Wood

*Well yield indicated is guaranteed for the date of the test only. You should be aware that the yield may not be constant over time due to uncontrollable geological, climatological, and underground water supply circumstances. Therefore, there is no assurance that the well yield will be reproducible at a later date.
** Each county has an acceptable minimum yield. Please check with the county that pertains to this parcel in order to determine if the yield is acceptable.

Cranmer Engineering, Inc.
Integrated Engineering Services

Sample Results

Peters Drilling and Pump Service
P.O.Box 1546
Grass Valley, CA 95945

Work Order: GHH0297
Received: 08/06/25 15:30
Reported: 08/07/25 11:19

Private Client

Sample Site: 14041 Loma Rica Rd GV
Sample Number GHH0297-01

Date Collected: 08/06/2025 13:00
Collected by: DH
Title 22 Designation:

No Chlorine Detected

	Result	Units	Reporting Limit	Method	Analyst Initials	Analysis Setup Time	Analysis Date
E.coli	<1.0	MPN/100 mL	1.0	SM 9223 B - Colilert 18	RN	08/06/25 15:16	08/07/25
Total Coliform	<1.0	MPN/100 mL	1.0	SM 9223 B - Colilert 18	RN	08/06/25 15:16	08/07/25

No coliform bacteria were detected in this sample. This result meets the guidelines for bacteriological potability (water potability) set by local public health departments and state regulating agencies.

Term and Qualifier Definitions

Item	Definition
ND	None detected at or above the reporting limit

Justin Smith
Laboratory Manager

Cranmer Engineering, Inc.
Integrated Engineering Services

1188 East Main Street Grass Valley, CA 95945
Phone: (530) 273-7284
Email: lab@cranmerengineeringinc.com

Lab use only
☐ Thio preserved
☒ Rec'd on Ice
Temp 1.8.0 °c probe ID TN dos

GHH0297

Bacteriological
CHAIN OF CUSTODY

Required Fields*

Company/Client Name*:	Report Attention*:	Invoice To*:	Phone*:
Peters Drilling	Additional cc's:	PO#:	Email*:

Company Address*:	City*:	State*:	Zip*:

~~*PW System #~~	Project #:

Project Name:	*Regulatory: ☐ YES ☐ NO
Sampler Name (Printed/Signature): James Hudson	Agency: _____

Title 22 Designation - Choose One: A = Routine, B = Raw, C = Repeat, D = Other, F = Special

Source Type: Ground Water=Well /Spring = GW Surface Water = SW

Matrix: Drinking water = DW Wastewater =WW

Analysis Required: Drinking Water MPN | Drinking Water PA | MTF MPN Total Coliform | MTF MPN Total and Fecal Coliform | HPC

Bacteria Bottle Lot #s / Notes / Comments: B250806cth 25G1705

#	Sample Site Name	Sampled* Date	Time	CL2 Res.	pH	Title 22 Designation - See above	Source Type - See above	Matrix	Drinking Water MPN	Drinking Water PA	MTF MPN Total Coliform	MTF MPN Total and Fecal Coliform	HPC	Bar Codes
1	1404 Lomarica Dr. GV.	8/6	1:00	ND			GW	DW	X					

Cranmer Engineering, Inc.
294343

Relinquished By: (Signature and Printed Name)	Company	Date	Time	Received by: (Signature and Printed Name)	Company	Date/Time
James Hudson	Peters	8/6/25	3:30			
Relinquished By: (Signature and Printed Name)	Company	Date	Time	Received by: (Signature and Printed Name)	Company	Date/Time

Received at Lab By: (Signature and Printed Name)	Date	Time	Payment Received at Delivery Date:	Amount:	Card	Check#	Cash
	8/6/25	15:30					

CEI strives for excellence and we would appreciate your feedback. Please email the lab at lab@cranmerengineeringinc.com or call our office.