

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

OFFICE USE ONLY  
 Log No. 103611  
 Permit No. \_\_\_\_\_  
 Basin 089

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. **59919**

1. OWNER **Bill Maloy** ADDRESS AT WELL LOCATION **100 Landing Ln.**  
 MAILING ADDRESS **100 Landing Ln. Washoe Valley** **Washoe Valley**  
**NV. 89704** *Subdivision Name:* \_\_\_\_\_ *County:* **Washoe**

2. LOCATION **NW¼SE¼ Sec23T16N/ R19E** Latitude **39.23612** UTM E \_\_\_\_\_  NAD 27  
 PERMIT/WAIVER NO. \_\_\_\_\_ Longitude **119.81622** N \_\_\_\_\_  NAD 83/WGS 84  
*Issued by Water Resources* **055-282-18** Parcel No. \_\_\_\_\_

3. WORK PERFORMED 4. PROPOSED USE 5. WELL TYPE

New Well  Replace  Recondition  Cable  Rotary  RVC  
 Deepen  Other  Municipal/Industrial  Irrigation  Test  Air  Other **mud**

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Sands		0	20	20
Sands & clay		20	40	20
Sand		40	60	20
Coarse sand		60	80	20
Gray clay		80	100	20
Gray clay & sand		100	120	20
Sand & gravel	x	120	200	80

*N 39.236225*  
*W 119.815218 NAD27*

9. WELL CONSTRUCTION

Depth Drilled **200** Feet Depth Cased **200** Feet

HOLE DIAMETER (BIT SIZE)

From \_\_\_\_\_ To \_\_\_\_\_

**10 5/8** Inches **0** Feet **200** Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<b>6 5/8</b>	<b>12.92</b>	<b>.188</b>	<b>+2</b>	<b>200</b>

Perforations:

Type of perforation **Machine cut**

Size of perforation **3/32**

From **160** feet to **200** feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Annular Seal:  Yes  No

Neat Cement **0** to **100**  Pumped  Poured  
 Cement Grout \_\_\_\_\_ to \_\_\_\_\_  Pumped  Poured  
 Concrete Grout \_\_\_\_\_ to \_\_\_\_\_  Pumped  Poured  
 ≥30% Bentonite Grout \_\_\_\_\_ to \_\_\_\_\_  Pumped  Poured

Gravel Pack:  Yes  No **100** to **200**  Pumped  Poured  
 Type: **1/4x1/8**

Bentonite Chips:  Yes  No \_\_\_\_\_ to \_\_\_\_\_  Pumped  Poured  
 Type: \_\_\_\_\_

Date started: **8/6, 20 07**  
 Date completed: **8/8, 20 07**

7. Water Level

Static water level: **30** feet below land surface  
 Artesian Flow: \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water Temperature: **Cool** °F  
 Quality: **Not tested**

8. WELL TEST DATA

TEST METHOD:	Bailer	Pump	Air Lift
G.P.M.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Draw Down (Feet Below Static)			
Time (Hours)			
<b>35</b>	<b>3</b>		

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 **1790**

Signed R. Bruce Mackay  
 By driller performing actual drilling on site or contractor

Date **8/9/07**