



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

OFFICE USE ONLY
Log No. 103781
Permit No. _____
Basin Ø93

PRINT OR TYPE ONLY

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.240

NOTICE OF INTENT NO. 57245

1. OWNER **Dan & Becky Cameron**
Mailing Address **P.O. Box 61025 Reno, NV. 8950**
ADDRESS AT WELL LOCATION **235 Prospect Hill Reno, NV 89506**

2. LOCATION SW NE Sec 01T22N/ R19E
Latitude 39.80387 N UTM E NAD 27
Longitude 119.79674 W N NAD 83/WGS 84
Subdivision Name: _____ County: **Washoe**
PERMIT/WAIVER NO. n/a Parcel No. **079-510-05**
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
Sand		0	19	19
Red Rock		19	22	3
Brown Clay		22	27	5
DG		27	72	45
Grante	X	72	350	278
N 39.803983 W 119.795731 NAD83				

9. WELL CONSTRUCTION
Depth Drilled 350 Feet Depth Cased 350 Feet
Well Diameter: _____
From _____ To _____
10 Inches _____ 0 Feet _____ 350 Feet
Inches _____ Feet _____ Feet
Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8 steel	14	.188	-1	20
6 5/8 PVC	4.07	.316	20	350

Perforations:
Type of perforation **mill slot**
Size of perforation **.032**
From _____ 180 feet to _____ 200 feet
From _____ 220 feet to _____ 240 feet
From _____ 280 feet to _____ 300 feet
From _____ 320 feet to _____ 350 feet
From _____ feet to _____ feet

Annular Seal: Yes No
 Neat Cement _____ to _____ Pumped Poured
 Cement Grout _____ to _____ Pumped Poured
 Concrete Grout 0 to 52 Pumped Poured
 ≥30% Bentonite Grout _____ to _____ Pumped Poured
Gravel Pack: Yes No 52 to 350 Pumped Poured
Type: **3/8 pea**
Bentonite Chips Yes No _____ to _____ Pumped Poured
Type: _____

7. Water Level
Static water level: 81 feet below land surface
Artesian Flow: **none** G.P.M. **none** P.S.I.
Water Temperature: **cool** °F
Quality: **good**

8. WELL TEST DATA

TEST METHOD:	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			
Approx.	<u>45</u>	<u>220</u>	<u>2 hrs.</u>

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name **Miller & Son's Drilling** (CONTRACTOR)
Address **P.O. Box 8056** (CONTRACTOR)
Reno, NV. 89507
Nevada contractor's license number issued by the State Contractor's Board **37915**
Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1418**
Signed Bruce Miller
By driller performing actual drilling on site or contractor
Date 9-20-06