STATE OF NEVADA

DIVISION OF WATER RESOURCES

WELL DRILLER'S REPORT

OFFICE USE ONLY
Log No. 104217
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. 59901

1. OWNER Marcia Joseph
MAILING ADDRESS 255 Finch Way Washoe Valley NV. 89704

ADDRESS AT WELL LOCATION 255 Finch Way Washoe Valley
Subdivision Name: County: Washoe

2. LOCATION ne¼sw¼ Sec32T17N/ R20E
PERMIT/WAIVER NO. 050-395-10
Issued by Water Resources Parcel. No.

Latitude 39.29311 UTM E ☐ NAD 27
Longitude 119.76394 N ☒ NAD 83/WGS 84

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

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
hole plug		240	250	10
Sand		250	260	10
Granite		260	340	80
Fractured granite	x	340	360	20
Granite		360	420	60
Fractured granite	x	420	460	40
Washoe Permit # WL 070096				
Sanitary seal see log 17406				
N 39.293215				
W 119.762939 NAD27				

Date started: 7/12, 20 07
Date completed: 7/13, 20 07

7. Water Level
Static water level: 141 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.	Draw Down (Feet Below Static)	Time (Hours)
20		3

9. WELL CONSTRUCTION
Depth Drilled 460 Feet Depth Cased 460 Feet

HOLE DIAMETER (BIT SIZE)

	From	To
6 1/8 Inches	240 Feet	460 Feet
Inches	Feet	Feet
Inches	Feet	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
5	10.79	.188	240	460

Perforations:
Type of perforation Machine cut
Size of perforation 3/32
From 340 feet to 360 feet
From 420 feet to 460 feet
From feet to feet
From feet to feet
From feet to feet

Annular Seal: ☐ Yes ☐ No
☐ Neat Cement to ☐ Pumped ☐ Poured
☐ Cement Grout to ☐ Pumped ☐ Poured
☐ Concrete Grout to ☐ Pumped ☐ Poured
☐ ≥30% Bentonite Grout to ☐ Pumped ☐ Poured
Gravel Pack: ☐ Yes ☐ No to ☐ Pumped ☐ Poured
Type:
Bentonite Chips: ☐ Yes ☐ No to ☐ Pumped ☐ Poured
Type:

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 7/16/07

2007 JUL 23 PM 1:03