

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

OFFICE USE ONLY
 Log No. 104738
 Permit No. _____
 Basin 588

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. 59864

1. OWNER **Gary Linscheid** ADDRESS AT WELL LOCATION **265 Theobald**
 MAILING ADDRESS **265 Theobald** **Reno**
Reno NV. 89511 **Subdivision Name:** _____ **County: Washoe**

2. LOCATION **se 1/4 sw 1/4 Sec 4 T17N/ R20E** Latitude **39.36209** UTM E _____ NAD 27
 PERMIT/WAIVER NO. **17-342-29** Longitude **119.74768** N _____ NAD 83/WGS 84
Issued by Water Resources Parcel No. _____

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
Top soil		0	1	1
Brown sandy clay		1	16	15
Brown clay boulder gravel		16	22	6
Brown volcanic rock soft		22	43	21
Sand gravel clay		43	58	15
Brown sandy clay		58	64	6
Black volcanic rock		64	119	55
Brown sandy clay		119	136	17
Gray volcanic rock		136	147	11
Brown silt		147	158	11
Volcanic boulder		158	160	2
Brown silt		160	176	16
Volcanic rock		176	190	14
Fracture	x	190	196	6
Brown silt clay		196	209	13
Boulder		209	210	1
Brown silt clay		210	215	5
Volcanic rock fracture clay		215	235	20
Hard volcanic rock		235	237	2
Black rusty volcanic rock	x	237	249	12
Brown sandy clay		249	254	5
Boulder		254	255	1
Brown clay		255	275	20

Washoe Co. Permit **WL070076**
N 39.362196
W 119.746678 NAD27

Date started: **6/20, 20 07**
 Date completed: **6/27, 20 07**

7. Water Level
 Static water level **230** 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:	<input type="checkbox"/> Bailer	<input checked="" type="checkbox"/> Pump	<input checked="" type="checkbox"/> Air Lift
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)	
Air	3	8.25	
Pump	2.5	225	96

9. WELL CONSTRUCTION
 Depth Drilled **275** Feet Depth Cased **275** Feet

HOLE DIAMETER (BIT SIZE)
 From _____ To _____
10 5/8 Inches **0** Feet **100** Feet
9 7/8 Inches **100** Feet **275** Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	12.92	.188	+2	275

Perforations:
 Type of perforation **Machine cut**
 Size of perforation **3/32**
 From **105** feet to **110** feet
 From **125** feet to **130** feet
 From **140** feet to **145** feet
 From **175** feet to **195** feet
 From **215** feet to **255** 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 **275** Pumped Poured
 Type: **1/4 x 1/8**

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 **923**

Signed R. Bruce MacKay
 By driller performing actual drilling on site or contractor
 Date **6/29/07**

Replaced by well log 104738