

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

OFFICE USE ONLY
Log No. 109077
Permit No. _____
Basin 102 pg1

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

Please complete this form in its entirety in
accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. 64610

1. OWNER USA - Bureau of Land Management
U.S. Geological Survey, Nevada WSC BLM
MAILING ADDRESS 2730 N. Deer Run Rd.
Carson City, NV 89701

ADDRESS AT WELL LOCATION 2.4 mi south of Weeks bridge on Alt. 95,
2.7 mi west from Alt 95, well is 280 ft north of road, 190 ft east of tracks
Subdivision Name: _____ County: Lyon

2. LOCATION NE ¼ NW ¼ Sec 10 T 16N N/S R 24 E
PERMIT/WAIVER No. M/O-1534 O15-701-03
Issued by Water Resources Parcel No. _____

Latitude 39.27074 UTM E NAD 27
Longitude 119.27990 N NAD 83/WGS 84

3. WORKED 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 Auger

6. LITHOLOGIC LOG				
Material	Water Strata	From	To	Thick-ness
fine sand and silt		0	2	2
fine sand and gravel		2	3	1
clay and gravel		3	5	2
dark brown clay		5	14	9
1-inch rounded cobbles	X	14	20	6
39.270822° N 119.278908° W NAD 27 (TA)				

9. WELL CONSTRUCTION				
Depth Drilled	Feet	Depth Cased	Feet	
<u>20</u>		<u>20</u>		
HOLE DIAMETER (BIT SIZE)				
	From	To		
<u>6 5/8</u>	Inches	<u>0</u>	Feet	<u>20</u> Feet
	Inches		Feet	Feet
	Inches		Feet	Feet

CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>2</u>	<u>Sched 40</u>	<u>0.31</u>	<u>0</u>	<u>20</u>

Perforations:				
Type of perforation	Size of perforation	From	feet to	feet
<u>Machine slot</u>	<u>0.02</u>	<u>15</u>	<u>20</u>	<u>feet</u>
				<u>feet</u>

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 13 to 20 Pumped Poured
 Type: SRI #6 sand
 Bentonite Chips: Yes No 0 to 13 Pumped Poured
 Type: Hydrated Pure Gold 3/8 chips

Date started: 3-Nov 20 09
Date completed: 3-Nov 20 09

7. Water Level
Static water level: 14 feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: cool °F
Quality: _____

8. WELL TEST DATA			
TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input checked="" type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift	<u>0.8</u>	<u>0.2</u>	<u>2</u>

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name Douglas K. Maurer
Contractor
Address USGS 2730 N. Deer Run Rd. Carson City, NV 89701
Contractor
Nevada contractor's license number _____
issued by the State Contractor's Board
Nevada driller's license number issued by the _____
Division of Water Resources, the on-site driller FP-1522
Signed Douglas K. Maurer
By driller performing actual drilling on site or contractor
Date 11/9/2009

Log # 09077
pg 2 of 2

