

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

OFFICE USE ONLY
Log No. 109550

Permit No. _____
Basin φ 27

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. 65223

1. OWNER K. K. Felder
MAILING ADDRESS 4835 Langley Lane Reno NV 89502

ADDRESS AT WELL LOCATION PSF-09-035
Subdivision Name: _____ County: Washoe

2. LOCATION SW 1/4 NE 1/4 Sec 17 T 19 N R 20 E
PERMIT/WAIVER No. M/D-1558 012-250-25
Issued by Water Resources Parcel No. _____

Latitude 39.515800 N UTM E 262788.5 NAD 27
Longitude 119.759295 W N 4377444.9 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 Sonic

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>sandy s.l.t</u>		<u>0</u>	<u>15</u>	<u>15</u>
<u>poorly graded sand</u>		<u>15</u>	<u>33</u>	<u>18</u>
<u>s.l.t. gravel</u>		<u>33</u>	<u>38</u>	<u>5</u>
<u>clayey gravel</u>		<u>38</u>	<u>44</u>	<u>6</u>
<u>poorly graded sand</u>		<u>44</u>	<u>60</u>	<u>16</u>

9. WELL CONSTRUCTION

Depth Drilled 60' Feet Depth Cased 20' Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet
<u>6</u>	<u>0</u>	<u>60</u>	<u>60</u>

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>2</u>		<u>SCH 80</u>	<u>0</u>	<u>20</u>

Perforations:

Type of perforation hor slot
Size of perforation 0.20

From 20' feet to 25' feet
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet

Annular Seal: Yes No

Neat Cement 60 to 35 Pumped Poured
 Cement Grout 60 to 35 Pumped Poured
 Concrete Grout _____ to _____ Pumped Poured
 30% Bentonite Grout 35 to 21 Pumped Poured

Gravel Pack: Yes No 21 to 3' Pumped Poured

Bentonite Chips: Yes No 3 to 1 Pumped Poured

Date started: 11/04, 20 09
Date completed: 11/04, 20 09

7. Water Level
Static water level: 11.83 feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: _____ °F
Quality: _____

8. WELL TEST DATA

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

10. DRILLER'S CERTIFICATION

This well was drilled under my supervision and the report is true to the best of my knowledge.

Name WDC Contractor
Address PO Box 141 Contractor
Zamora CA 95698
Nevada contractor's license number 0012852
issued by the State Contractor's Board
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1880

Signed [Signature]
By driller performing actual drilling on-site or contractor
Date 11/04/09