

**ORIGINAL**

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

OFFICE USE ONLY  
Log No. 110684  
Permit No. 51902  
Basin 103

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. 64662

1. OWNER CITY OF CARSON CITY ADDRESS AT WELL LOCATION 5355 EAST FIFTH STREET  
MAILING ADDRESS 201 NORTH CARSON STREET (Test Hole)  
CARSON CITY, NV 89701 Subdivision Name: \_\_\_\_\_ County: Carson City

2. LOCATION SE 1/4 SW 1/4 Sec 14 T 15N N/S R 20 E Latitude 39° 09.474 N UTM E  NAD 27  
PERMIT/WAIVER No. 51902 Longitude 119° 42.401 W N  NAD 83/WGS 84  
Issued by Water Resources Parcel No. \_\_\_\_\_

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

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
SAND		0'	8'	8'
GRAVEL AND COBBLES		8'	18'	10'
SILTY CLAY		18'	28'	10'
SAND		28'	125'	97'
SAND, GRAVEL & SOME CLAY		125'	135'	10'
SAND AND GRAVEL		135'	220'	85'
SAND AND CLAY		220'	240'	20'
SAND AND GRAVEL		240'	310'	70'
SAND, GRAVEL & SOME CLAY		310'	440'	130'
SAND AND GRAVEL		440'	680'	240'
CLAY		680'	700'	20'

NAD-27 GPS  
39.157990°N  
119.705672°W

9. WELL CONSTRUCTION  
Depth Drilled 700' Feet Depth Cased 0' Feet  
HOLE DIAMETER (BIT SIZE)  
From 0' To 700'  
6" Inches Feet  
Inches Feet  
Inches Feet  
CASING SCHEDULE  
Size O.D. (Inches) Weight/Ft. (Pounds) Wall Thickness (Inches) From (Feet) To (Feet)  
Perforations:  
Type of perforation \_\_\_\_\_  
Size of perforation \_\_\_\_\_  
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: \_\_\_\_\_

Date started: 10-Mar, 20 10  
Date completed: 12-Mar, 20 10

7. Water Level  
Static water level: 10' feet below land surface  
Artesian Flow: \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
Water Temperature: \_\_\_\_\_ °F  
Quality: \_\_\_\_\_

8. WELL TEST DATA

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

STATE ENGINEERS OFFICE  
2010 MAY -6 AM 10:52  
RECEIVED

10. DRILLER'S CERTIFICATION  
This well was drilled under my supervision and the report is true to the best of my knowledge.  
Name Hydro Resources-West, Inc. Contractor  
Address 4975 W Winnemucca Blvd Contractor  
Winnemucca, NV 89445  
Nevada contractor's license number \_\_\_\_\_  
issued by the State Contractor's Board 56797  
Nevada driller's license number issued by the \_\_\_\_\_  
Division of Water Resources, the on-site driller # 1713  
Signed Cheryl Jayne-Office  
By driller performing actual drilling on site of contractor  
Date 5/4/2010