

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

OFFICE USE ONLY
Log No. 111691
Permit No. _____
Basin 087

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. 64975 ~~85004~~

1. OWNER Howard Espinosa ADDRESS AT WELL LOCATION 12555 Westridge
MAILING ADDRESS 12555 Westridge Reno, NV 89511
Subdivision Name: _____ County: Washoe

2. LOCATION SE 1/4 SE 1/4 Sec 18 T 18N N/S/R 20 E Latitude 39.41983 UTM E NAD 27
PERMIT/WAIVER No. 16204206 Longitude 119.77551 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
<i>* driller came back in to perf once more. from 200' to 226'</i>				
<i>Recondition of well logs:</i>				
<i>10261</i>				
<i>31648</i>				
<i>111383</i>				
<i>39.419, 919° N NAD27 D.D.</i>				
<i>119.774, 489° W</i>				
<i>Reconditioning of logs:</i>				
<i># 10261 (original)</i>				
<i># 31648 (deepening)</i>				
Date started:	<u>28-Jun</u>	<u>20</u>	<u>10</u>	
Date completed:	<u>29-Jun</u>	<u>20</u>	<u>10</u>	

9. WELL CONSTRUCTION

Depth Drilled _____ Feet Depth Cased _____ Feet

HOLE DIAMETER (BIT SIZE)

Inches	Feet	To	Feet
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Perforations:

Type of perforation Mills Knife
Size of perforation 3/8 x 1

From	feet to	feet
<u>200</u>	<u>226</u>	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Annular Seal: Yes No

Material	to	to	Pumped	Poured
<input type="checkbox"/> Neat Cement	<u>50</u>	_____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Cement Grout	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Concrete Grout	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> ≥30% Bentonite Grout	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

Gravel Pack: Yes No _____ to _____ Pumped Poured
Type: _____

Bentonite Chips: Yes No _____ to _____ Pumped Poured
Type: _____

7. Water Level
Static water level: 170 feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: cold °F
Quality: unknown

8. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailor <input checked="" type="checkbox"/> Pump <input type="checkbox"/> Air Lift	<u>15</u>	<u>13</u>	<u>3</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

10. DRILLER'S CERTIFICATION

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

Name McKay Drilling, Inc.
Contractor

Address 4850 Joule St
Contractor

Reno, Nv 89502

Nevada contractor's license number issued by the State Contractor's Board 14170

Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2121

Signed Steve McKay
By driller performing actual drilling on site or contractor

Date 7/1/2010