WHITE - DIVISION OF WATER RESOURCES
CANARY - CLIENT'S COPY
PINK - WELL DRILLER'S COPY

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

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

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

OFFICE USE ONLY
Log No. 112820
Permit No.
Basin 084

NOTICE OF INTENT NO. 44441

1. OWNER Gilroy Hamilton
MAILING ADDRESS 2800 Whiskey Springs Rd.
Reno, NV 89510

ADDRESS AT WELL LOCATION 2800 Whiskey Springs Rd.

2. LOCATION NW 1/4 NE 1/4 Sec. 7 T 22N N/S R 22E E Washoe County
PERMIT NO. Issued by Water Resources
~~077-320-04~~ ? Parcel No.
077-320-09 (MH) Subdivision Name

3. WORK PERFORMED
☐ New Well ☐ Replace ☒ Recondition
☐ Deepen ☐ Abandon ☐ 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	Thickness
On this date we perforated the well using a Mills Knife Perforator. The static water level was well below either of the perforated zones. The reason for perforating was to obtain vapor extraction tests.				
Google Estimate :				
39.794283°N NAD27 D.D.				
119.552060°W -GPS-				
Also See log 66019				

Date started 8/29/2000 , 19__
Date completed 8/29/2000 , 19__

7. WELL TEST DATA
TEST METHOD: ☐ Bailer ☐ Pump ☐ Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)

8. WELL CONSTRUCTION
Depth Drilled ____ Feet Depth Cased 700 Feet

HOLE DIAMETER (BIT SIZE)

	From	To
Inches	Feet	Feet
Inches	Feet	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	0	700

Perforations:
Type perforation Mills Knife
Size perforation 1" x 1/8" approx.
From 275 feet to 325 feet
From 55 feet to 100 feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet

Surface Seal: ☐ Yes ☒ No
Depth of Seal
Placement Method: ☐ Pumped ☐ Poured
Seal Type: ☐ Neat Cement ☐ Cement Grout ☐ Concrete Grout

Gravel Packed: ☐ Yes ☒ No
From ____ feet to ____ feet

9. WATER LEVEL
Static water level ____ feet below land surface
Artesian flow ____ G.P.M. ____ P.S.I.
Water temperature ____ °F Quality

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 1719
Signed R. Bruce MacKay By driller performing actual drilling on-site or contractor
Date 9/1/00

USE ADDITIONAL SHEETS IF NECESSARY

STATE ENGINEER
Jan 20 2011

MMH-(F)

FACSIMILE RCVD