STATE OF NEVADA

DIVISION OF WATER RESOURCES

# WELL DRILLER'S REPORT

OFFICE USE ONLY
Log No. 113817
Permit No.
Basin 088

PRINT OR TYPE ONLY

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

NOTICE OF INTENT NO. 66460

1. OWNER Ernest Anderson
MAILING ADDRESS 330 Abies Rd.
Reno, NV 89511

ADDRESS AT WELL LOCATION 330 Abies Rd
Reno, NV 89511
Subdivision Name: Galena County: Washoe

2. LOCATION SW ¼SW¼ Sec10T17N/ R19E
PERMIT/WAIVER NO. 047-130-32
Issued by Water Resources Parcel. No.

Latitude N39.34810 UTM E ☐ NAD 27
Longitude W119.84106 N ☒ NAD 83/WGS 84

3. WORK PERFORMED
☐ New Well ☐ Replace ☐ Recondition
☐ Deepen ☐ Other Geothermal

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 |
|---|---|---|---|---|
| Top Soil W/Boulder | | 0 | 3 | 3 |
| Gray Volcanic | | 3 | 46 | 43 |
| Brown Sandy Clays | | 46 | 89 | 43 |
| Brown to Gray Volcanic | | 89 | 129 | 40 |
| Fractured Volcanic | | 129 | 143 | 14 |
| Brown to Gray Volcanic | | 143 | 301 | 158 |
| Well #5 | | | | |
| Installed 1" X 610' Loop | | | | |
| Grouted from 301' to Surface | | | | |
| with Cetco High TC grout. | | | | |

Date started: 04-12, 20 11
Date completed: 04-13, 20 11

7. Water Level
Static water level: feet below land surface
Artesian Flow: G.P.M. P.S.I
Water Temperature: °F
Quality: not tested

8. WELL TEST DATA
TEST METHOD: ☐ Bailer ☐ Pump ☒ Air Lift

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

9. WELL CONSTRUCTION
Depth Drilled 301 Feet Depth Cased 300 Feet

HOLE DIAMETER (BIT SIZE)

| | From | To |
|---|---|---|
| 6 5/8 Inches | 0 Feet | 301 Feet |
| Inches | Feet | Feet |
| Inches | Feet | Feet |

CASING SCHEDULE

| Size O.D. (Inches) | Weight/Ft. (Pounds) | Wall Thickness (Inches) | From (Feet) | To (Feet) |
|---|---|---|---|---|
| 1" | | LOOPS | +2 | 301 |
| | | | | |

Perforations:
Type of perforation
Size of perforation
From feet to feet
From feet to feet
From feet to feet
From feet to feet
From feet to feet

Annular Seal: ☒ Yes ☐ No

| | | | | |
|---|---|---|---|---|
| ☐ Neat Cement | | to | ☐ Pumped | ☐ Poured |
| ☒ Cement Grout | 0 | to 301 | ☒ 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: | | | | |

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 923
Signed R. Bruce MacKay
By driller performing actual drilling on site or contractor
Date 04-19-11

(Rev 05-06) USE ADDITIONAL SHEETS IF NECESSARY

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39.348190°N
119.840038°W NAD 27 TA