STATE OF NEVADA

DIVISION OF WATER RESOURCES

WELL DRILLER'S REPORT

OFFICE USE ONLY
Log No. 114013
Permit No.
Basin 104

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. 66464

1. OWNER Carson City School Dist.
MAILING ADDRESS 1111 N. Saliman Rd.
SE NW Carson City, NV 89701

ADDRESS AT WELL LOCATION 1111 N. Saliman Rd.
Carson City, NV 89701
Subdivision Name: County: Carson

2. LOCATION ¼ ¼ Sec16T15N/ R20E
Latitude N39.16823 UTM E ☐ NAD 27
Longitude W119.74672 N ☒ NAD 83/WGS 84

PERMIT/WAIVER NO. 010-041-64
Issued by Water Resources Parcel. No.

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 Mud

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
DG		0	35	35
Gray Sandy Clays		35	46	11
DG w/clay streaks		46	95	49
Rusty Sandy Clays		95	111	16
Brown Sandy Clays		111	139	28
DG		139	166	27
Gray Sandy Clays		166	211	45
Gray Sands w/gray clay streaks		211	300	89
Well # 6				
Geothermal Heat Loop Grouted from bottom to top with High TC Geothermal Grout. 1" loops 1 per well.				

Date started: 5-14, 20 11
Date completed: 5-14, 20 11

9. WELL CONSTRUCTION
Depth Drilled 300 Feet Depth Cased 299 Feet

HOLE DIAMETER (BIT SIZE)

	From	To
5 7/8 Inches	0 Feet	300 Feet
Inches	Feet	Feet
Inches	Feet	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
1"		POLY	+5	299

Perforations:
Type of perforation NONE
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 to ☐ Pumped ☐ Poured
☐ Concrete Grout to ☐ Pumped ☐ Poured
☒ ≥30% Bentonite Grout 0 to 299 ☒ Pumped ☐ Poured
Gravel Pack: ☐ Yes ☒ No to ☐ Pumped ☐ Poured
Type:
Bentonite Chips: ☐ Yes ☒ No to ☐ Pumped ☐ Poured
Type:

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)

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 23095
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 5-25-11

(Rev 05-06) USE ADDITIONAL SHEETS IF NECESSARY

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39.168320°N
119.745706°W NAD 27