

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

OFFICE USE ONLY
Log No. 115495
Permit No. _____
Basin 087

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. **69150** -

1. OWNER **Lee Conley** ADDRESS AT WELL LOCATION **Same**
MAILING ADDRESS **15770 Fawn Ln**
Reno, NV 89511 Subdivision Name: _____ County: **Washoe**

2. LOCATION **SE 1/4 SW 1/4 Sec 36 T 18N R 19 E** Latitude **39.378274** UTM E _____ NAD 27
PERMIT/WAIVER NO. **DOM12-05'** **150-242-12** Longitude **-119.803221** N _____ NAD 83/WGS 84
Issued by Water Resources Parcel No. _____

3. WORK 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
Open Hole		185	205	20
Gray Volcanic Rock		205	245	40
Fracture, Water Bearing	X	245	247	2
Gray & Reddish Brown Volcanic Rock		247	274	27
Fracture, Water Bearing	X	274	276	2
Gray & Reddish Brown Volcanic Rock		276	312	36
Weathered Granite		312	330	18
Fracture, Water Bearing	X	330	331	1
Weathered Granite		331	376	45

Washoe County Permit # **WL120033**

Dupens Well log 20282

9. WELL CONSTRUCTION

Depth Drilled **376** Feet Depth Cased **376** Feet

HOLE DIAMETER (BIT SIZE)

From	To
5 5/8 Inches	185 Feet 376 Feet
_____ Inches	_____ Feet _____ Feet
_____ Inches	_____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
5	10.2	.188	166	376

Perforations:

Type of perforation **Factory**

Size of perforation **3/32 x 3"**

From	To
336 feet to	376 feet
_____ feet to	_____ feet
_____ feet to	_____ feet
_____ feet to	_____ feet

Annular Seal: Yes No

<input type="checkbox"/> Neat Cement	_____ to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> Cement Grout	_____ to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> Concrete Grout	_____ to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> ≥30% Bentonite Grout	_____ to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
Gravel Pack: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____ to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
Type: _____			
Bentonite Chips: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____ to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
Type: _____			

7. Water Level

Static water level: **156** feet below land surface

Artesian Flow: _____ G.P.M. _____ P.S.I.

Water Temperature: **cool** °F

Quality: **not tested**

8. WELL TEST DATA

TEST METHOD:	Bailer	Pump	Air Lift
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
G.P.M.	Draw Down (Feet Below Static)		Time (Hours)
30+			3
39.378274° N	NAD 27		
119.803221° W			

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 **8/16/12**