

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

OFFICE USE ONLY
 Log No. 115497
 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. 69132 ✓

1. OWNER **Tom Lee** ADDRESS AT WELL LOCATION **Same**
 MAILING ADDRESS **12550 Westridge**
Reno, NV 89511 Subdivision Name: _____ County: **Washoe**

2. LOCATION **SE ¼ SE ¼ Sec 18 T 18N/ R 20 E** Latitude **39.419822** UTM E _____ NAD 27
 PERMIT/WAIVER NO. **DOM12-04** **162-043-20** Longitude **-119.773113** 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 **MUD**

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Brown Sandy Clay		189	202	13
Soft Zone		202	206	4
Brown Sandy Clay		206	252	46
Soft Zone		252	269	17
Brown Sandy Clay		269	289	20
Cobbles, Gravels & Sand		289	299	10
Sandy Clays		299	305	6
Soft Zone with Clay Streaks		305	334	29
Brown volcanic rock & Clay Streaks		334	378	44
Caly		378	380	2
Volcanic Rock		380	383	3
<i>original well log unknown</i>				
Washoe County Permit # WL120031				

9. WELL CONSTRUCTION

Depth Drilled **383** Feet Depth Cased **383** Feet

HOLE DIAMETER (BIT SIZE)
 From **6.25** Inches To **189** Feet **383** Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
5	10.8	.188	168	383

Perforations:
 Type of perforation **Factory Cut**
 Size of perforation **3/32 x 3"**

From	To
243 feet to	263 feet
323 feet to	333 feet
373 feet to	383 feet
_____ feet to	_____ feet
_____ feet to	_____ feet

Annular Seal: Yes No

Material	to	Seal Type
<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
Bentonite Chips: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____ to _____	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured

7. Water Level

Static water level: **212** 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:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	35		3
		39.419911°N	NAD27
		119.772092°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 **8/8/12**