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

OFFICE USE ONLY
Log No. 116179
Permit No.
Basin No. 083

PRINT OR TYPE IN BLACK INK ONLY
DO NOT WRITE ON BACK

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

NOTICE OF INTENT NO. 65667
WELL NAME *(If applicable)*:

1. OWNER/CLIENT NAME Washoe County
MAILING ADDRESS 9390 Gate Way Dr., Ste # 230
Reno, Nevada 89521

DETAILED ADDRESS AT WELL LOCATION Center Well, # 102W2
APN # 084-120-27
Subdivision Name: *County:* Washoe Co.

2. PLS LOCATION nw ¼ nw ¼ 35 Sec 20N N/S 22 E
PERMIT/WAIVER NO. m 0-1800 *Issued by Water Resources* *Current Parcel No.*

Latitude 39.56428 UTM E ☐ NAD 27
Longitude -119.49176 UTM N ☒ NAD 83/WGS 84

3. WORKED PERFORMED
☒ New Well ☐ Deepen: Orig WL#
☐ Replacement: Original well log #
☐ Recondition: Original well log #

4. PROPOSED USE
☐ Domestic ☐ Irrigation ☒ Monitor
☐ Mining / Dewater ☐ Com / Ind ☐ Stock
☐ Test / Other ☐ Mun / QM ☐ Rec

5. WELL TYPE
☐ Auger ☐ Rotary ☐ RVC
☒ Air ☐ Mud ☐ Sonic
☐ Other

6. LITHOLOGIC LOG

Material Encountered	Lost Circ.	Water Strata	From	To	Thickness
Sand Gravel			0	14	14

Date started: 7-Aug , 20 12
Date completed: 10-Aug , 20 12

RECEIVED 2013 FEB 1 AM 11:27 STATE ENGINEER'S OFFICE

9. WELL CONSTRUCTION
Depth Drilled: 14 Feet Depth Cased: 14 Feet

HOLE DIAMETER (BIT SIZE)

		From		To	
5	Inches	0	Feet	14	Feet
	Inches		Feet		Feet
	Inches		Feet		Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
5	PVC	SCH40	0	12

PERFORATIONS:
Type of perforation: Machine
Size of perforation: 20
From 12 Feet To 14 Feet
From Feet To Feet
From Feet To Feet

ANNULAR MATERIALS

☐ Sanitary Seal		to		
☐ Neat Cement		to	☐ Pumped	☐ Poured
☐ Cement Grout		to	☐ Pumped	☐ Poured
☐ Concrete Grout	0	to 3	☐ Pumped	☒ Poured
☐ Bentonite Chips	3	to 8	☐ Pumped	☒ Poured
☐ Bentonite Grout		to	☐ Pumped	☐ Poured
☐ 15 % ☐ 20 % ☐ Other, explain:				
☐ Gravel Pack [> 0.2 in.]	8	to 14	☐ Pumped	☒ Poured
☐ Sand Pack [< 0.2 in.]		to	☐ Pumped	☐ Poured
☐ Other, explain:		to	☐ Pumped	☐ Poured

7. WATER QUALITIES
Static water level: 5 Feet below land surface
Artesian Flow: G.P.M. P.S.I.
Water Temperature: ° Fahrenheit
Water Quality:

8. WELL TEST DATA
Test Method: ☐ Bailer ☐ Pump ☐ Air Lift

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

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision. This report is true to the best of my knowledge.
Name Western Strata Exploration, Inc. *Contractor*
Address PO Box 657, Clarksburg, CA 95612 *Contractor*
Nevada contractor's license number as issued by the *State Contractor's Board:* #0034236A
Nevada well driller's license number as issued by the *Nevada Division of Water Resources (on-site driller):* M1978
Signed: *By driller performing actual drilling on site or contractor*
Date: 1/21/13

(Rev. 08-12) USE ADDITIONAL SHEETS IF NECESSARY

39.564387°N
119.490762°W
NAD27