STATE OF NEVADA

DIVISION OF WATER RESOURCES

WELL DRILLER'S REPORT

OFFICE USE ONLY
Log No. 117846
Permit No.
Basin 092A

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. 68952

1. OWNER Eddie Rhodes
MAILING ADDRESS 7507 Vista View Dr.
Reno, NV 89510

ADDRESS AT WELL LOCATION 1210 Stampede well # 2
Reno, NV 89510
Subdivision Name: County: Washoe

2. LOCATION SE¼SW¼ Sec29T22N/ R19E
PERMIT/WAIVER NO. 079-410-23
Issued by Water Resources Parcel. No.

Latitude N39.74006 UTM E ☐ NAD 27
Longitude W119.87627 N ☒ NAD 83/WGS 84

3. WORK PERFORMED
☒ New Well ☐ Replace ☐ Recondition
☐ Deepen ☐ Other Geo-Loops

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
Fill		0	3	3
Gray Volcanic Rock, Broken		3	36	33
Brown Clays		36	91	55
Brown Broken Volcanic Rock		91	106	15
Reddish Brown Volcanics		106	154	49

Well # 2

The well was pressure grouted from the bottom to surface.

Used 7 bgs of grout & 56 bgs of sand.

Date started: 2-24, 20 12
Date completed: 3-2, 20 12

9. WELL CONSTRUCTION
Depth Drilled 154 Feet Depth Cased 154 Feet

HOLE DIAMETER (BIT SIZE)

	From	To
6 1/8 Inches	0 Feet	154 Feet
Inches	Feet	Feet
Inches	Feet	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
3/4		POLY	+5	154

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 154 to 0 ☒ 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:

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~~ 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 3-9-12

RECEIVED 2012 MAR 23 AM 10:13

(Rev 05-06) USE ADDITIONAL SHEETS IF NECESSARY Forms Provided by Forms-On-A-Disk · (214) 340-9429 · FormsOnADisk.com

NAD27 39.740152°N, 119.875242°W