

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

OFFICE USE ONLY
 Log No. 118554
 Permit No. _____
 Basin 088

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. 70990

1. OWNER **Ken Cannata** ADDRESS AT WELL LOCATION **Same**
 MAILING ADDRESS **16455 Bonnie Ln**
Reno, NV 89511 Subdivision Name: _____ County: **Washoe**

2. LOCATION **SE¼NE¼ Sec10T17N/ R19E** Latitude **39.355853** UTM E NAD 27
 PERMIT/WAIVER NO. **DOM13-70** **047-021-02** Longitude **119.827134** 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
Sand & Brown Clay		210	220	10
Gravel & Brown Clay	X	220	240	20
Brown Sand, Gravel & Clay		240	260	20
Brown Hard Sandy Clay		260	280	20
Cobbles, Sand, Gravel & Clay	X	280	315	35
Broken Weathered Granite	X	315	400	85
Brown Sand & Boulders	X	400	410	10

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 2013 NOV 19 AM 11:24
 STATE ENGINEERS OFFICE

Deepens unknown well log
 NAD 27
 39.355853
 119.826134

Date started: 11/5, 2013
 Date completed: 11/7, 2013

7. Water Level
 Static water level: **212** feet below land surface
 Artesian Flow: _____ G.P.M. _____ P.S.I.
 Water Temperature: _____ °F
 Quality: **not tested**

8. WELL TEST DATA

TEST METHOD:	<input type="checkbox"/> Bailer	<input checked="" type="checkbox"/> Pump	<input checked="" type="checkbox"/> Air Lift
	Draw Down (Feet Below Static)		Time (Hours)
Air			2
Pump	25+	22	1
	G.P.M.		

9. WELL CONSTRUCTION
 Depth Drilled **410** Feet Depth Cased **410** Feet
 HOLE DIAMETER (BIT SIZE)
 From _____ To _____
7 7/8 Inches **210** Feet **410** Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	12.92	.188	190	410

Perforations:
 Type of perforation **Factory**
 Size of perforation **.060 double row**

From _____	230 feet to	250 feet
From _____	270 feet to	290 feet
From _____	350 feet to	370 feet
From _____	390 feet to	410 feet
From _____	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 type="checkbox"/> No	_____ to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
Type: _____			

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 **1790**

Signed R. Bruce MacKay
 By driller performing actual drilling on site or contractor

Date **11/12/13**