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

OFFICE USE ONLY
Log No. 120022
Permit No.
Basin No. 104

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. 71170
WELL NAME *(if applicable)*: MW-23

1. OWNER/CLIENT NAME NDEP
MAILING ADDRESS 901 S Stewart St Suite 4001
Carson City, NV 89701

DETAILED ADDRESS AT WELL LOCATION Facility ID: 1-000030
2152 N Carson Street Carson City, NV
Subdivision Name: *County:* Carson City

2. PLS LOCATION SW ¼ NW ¼ 8 Sec 15 N/S 20 E
PERMIT/WAIVER NO. *Issued by Water Resources* 002-072-14 *Current Parcel No.*

Latitude 39.180138 UTM E ☐ NAD 27
Longitude 119.766738 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
Dry Brown Clay			0	18	18
Wet Silty Clay			18	25	7

Nad27
39.180228°N
119.765723°W

Date started: 7-Apr , 20 14
Date completed: 9-Apr , 20 14

9. *WELL CONSTRUCTION*
Depth Drilled: 25 Feet Depth Cased: 25 Feet

HOLE DIAMETER (BIT SIZE)

		From		To	
8	Inches	0	Feet	25	Feet
	Inches		Feet		Feet
	Inches		Feet		Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
2		Sch 40	0	25

PERFORATIONS:
Type of perforation: Slot
Size of perforation: 0.02
From 15 Feet To 25 Feet
From Feet To Feet
From Feet To Feet

ANNULAR MATERIALS

☐ Sanitary Seal		to			
☐ Neat Cement		to		☐ Pumped	☐ Poured
☒ Cement Grout	0	to	11	☒ Pumped	☐ Poured
☐ Concrete Grout		to		☐ Pumped	☐ Poured
☒ Bentonite Chips	11	to	13	☐ Pumped	☒ Poured
☐ Bentonite Grout		to		☐ Pumped	☐ Poured
☐ 15 % ☐ 20 % ☐ Other, explain:					
☐ Gravel Pack [> 0.2 in.]		to		☐ Pumped	☐ Poured
☒ Sand Pack [< 0.2 in.]	13	to	25	☐ Pumped	☒ Poured
☐ Other, explain:		to		☐ Pumped	☐ Poured

7. *WATER QUALITIES*
Static water level: 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 Cascade Drilling, L.P. *Contractor*
Address 3000 Duluth Street West Sacramento, CA 95691 *Contractor*
Nevada contractor's license number as issued by the *State Contractor's Board:* 73966
Nevada well driller's license number as issued by the *Nevada Division of Water Resources (on-site driller):* M-1977
Signed: *By driller performing actual drilling on site or contractor*
Date: 23-Apr-14

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