

VE-4

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

OFFICE USE ONLY
Log No. 121584
Permit No.
Basin 087

PRINT OR TYPE 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. 70114

1. OWNER Leahand Properties Corp 7-11 Corp
MAILING ADDRESS PO Box 711 Dallas TX 75221

ADDRESS AT WELL LOCATION 1680 Silverado Blvd, Reno
Subdivision Name: Truckee Meadows County: Washoe

2. LOCATION SE 1/4 SW 1/4 Sec 6 T 19 N R 20 E
PERMIT/WAIVER No. MO 1959 008-073-01
Issued by Water Resources Parcel No.

Latitude 39.54449621 UTM E 260899.01 NAD 27
Longitude -119.78248848 N 4380900.77 NAD 83/WGS 84

3. WORKED PERFORMED
 New Well Replace Recondition
 Deepen Other

4. PROPOSED USE
 Domestic Irrigation Test Stock
 Municipal/Industrial Monitor

5. WELL TYPE
 Cable Rotary RVC
 Air Other

6. LITHOLOGIC LOG				
Material	Water Strata	From	To	Thickness
Asphalt		0	6"	6"
Loose sand, gravel		6"	5'	4 1/2'
gravelly sand		5	10	5'
rounded gravel, sand		10	15	5'
well rounded gravel		15	20	5'
Poorly graded sand		20	25	5'
gravel, sand mix		25	30	5'
Same as above		30	35	5'
NAD 27 39.5445051°N 119.7824885°W				

9. WELL CONSTRUCTION			
Depth Drilled	Feet	Depth Cased	Feet
35		35	
HOLE DIAMETER (BIT SIZE)			
6 1/2	Inches	0	Feet 35
	Inches		Feet
	Inches		Feet

CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
4"		SCH 40	0	35

Perforations:
Type of perforation slotted
Size of perforation .010
From 20 feet to 35 feet
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet

Annular Seal: Yes No
 Neat Cement 16' to 1' Pumped Poured
 Cement Grout _____ Pumped Poured
 Concrete Grout _____ Pumped Poured
 ≥30% Bentonite Grout _____ Pumped Poured
 Gravel Pack: Yes No 35' to 18' Pumped Poured
 Type: 2 1/2" filter sand
 Bentonite Chips: Yes No 18' to 16' Pumped Poured
 Type: medium

Date started: Nov 26, 20 14
Date completed: Nov 26, 20 14

7. Water Level
Static water level: _____ feet below land surface
Artesian Flow: N/A G.P.M. _____ P.S.I. _____
Water Temperature: N/A °F
Quality: _____

8. WELL TEST DATA			
TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>N/A</u>			

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name Greens Drilling & Testing Contractor
Address 950 Home rd North Las Vegas NV 89153 Contractor
Nevada contractor's license number 38113
issued by the State Contractor's Board
Nevada driller's license number issued by the 243542
Division of Water Resources, the on-site driller
Signed _____
By driller performing actual drilling on-site or contractor
Date 12/7/14

(Rev. 05-06)

USE ADDITIONAL SHEETS IF NECESSARY