

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

OFFICE USE ONLY
Log No. 123117
Permit No. _____
Basin No. 105

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. 74269
WELL NAME (if applicable): well#5

1. OWNER/CLIENT NAME BIA - Washoe Tribe of NV & CA
MAILING ADDRESS 311 E. Washington St. Carson City NV 89701

DETAILED ADDRESS AT WELL LOCATION 919 N HWY 395
Douglas County NV
Subdivision Name: _____ County: _____

2. PLS LOCATION SE 1/4 SW 1/4 11 Sec 12S N15 E 20 E
PERMIT/WAIVER NO. DW-117 12201102009
Issued by Water Resources Current Parcel No.

Latitude 38.911810° N UTM E NAD 27
Longitude 119.709036° W 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
<u>silty sand, cobble-silty clay</u>			<u>0</u>	<u>3</u>
<u>silty clay-silty sand cobble</u>			<u>3</u>	<u>6</u>
<u>silty sand cobble-clay</u>			<u>6</u>	<u>19</u>
<u>clay-silty cobble</u>			<u>19</u>	<u>21</u>
<u>silty cobble-clay</u>			<u>21</u>	<u>28</u>
<u>clay-silty cobble</u>			<u>28</u>	<u>30</u>

9. INSTRUCTION

Depth Drilled: 30 Feet Depth Cased: 30 Feet

HOLE DIAMETER (BIT SIZE)

From	To
<u>24</u> Inches	<u>0</u> Feet <u>30</u> Feet
_____ Inches	_____ Feet _____ Feet
_____ Inches	_____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>8</u>	<u>12</u>	<u>5/8</u>	<u>0</u>	<u>30</u>

Annular Materials

0-10' - Steel Spacer

~~10-20' - Concrete Seal~~

NAD 27
38.911903
119.708028

ANNULAR MATERIALS

Sanitary 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
Bentonite Chips <u>0</u> to <u>10</u>	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
<input checked="" type="checkbox"/> Gravel Pack [> 0.2 in.] <u>10</u> to <u>30</u>	<input type="checkbox"/> Pumped <input checked="" type="checkbox"/> Poured
<input type="checkbox"/> Sand Pack [< 0.2 in.] _____ to _____	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
<input type="checkbox"/> Other, explain: _____ to _____	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured

3/8 pea gravel

PERFORATIONS:

Type of perforation: machine slot

Size of perforation: 0.032

From <u>10</u> Feet	To <u>30</u> Feet
From _____ Feet	To _____ Feet
From _____ Feet	To _____ Feet
From _____ Feet	To _____ Feet
From _____ Feet	To _____ Feet

Date started: 3-Aug, 20 15
Date completed: 3-Aug, 20 15

7. WATER QUALITIES
Static water level: 9ft Feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: _____ ° Fahrenheit
Water Quality: _____

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision. This report is true to the best of my knowledge.
Name Viking Drillers, Inc
Address 5950 Granite Lake Drive, Granite Bay, CA 95746

8. WELL TEST DATA

Test Method: Bailor Pump Air Lift

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

Nevada contractor's license number as issued by the State Contractor's Board. 0094680
Nevada well driller's license number as issued by the Nevada Division of Water Resources (on-site driller). 2361
Signed: [Signature]
Date: 8/13/2015

(Rev. 12-13)

USE ADDITIONAL SHEETS IF NECESSARY

RECEIVED
2015 AUG 19 AM 11:20
STATE ENGINEERS OFFICE