

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

OFFICE USE ONLY
Log No. 123156
Permit No. _____
Basin No. 087

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. 38101
WELL NAME (if applicable): well#9

1. OWNER/CLIENT NAME Regional Transportation Commission
MAILING ADDRESS 1105 Terminal Way STE 108
Reno NV 89502

DETAILED ADDRESS AT WELL LOCATION Clean Water Way, Washoe
County, NV
Subdivision Name: _____ County: _____

2. PLS LOCATION SE ¼ SE ¼ 15 Sec 16N N/S 20 E
PERMIT/WAIVER NO. DW-116 021-030-09
Issued by Water Resources Current Parcel No.

Latitude 39.507039°N UTM E _____ NAD 27
Longitude 119.716525°W UTM N _____ NAD 83/WGS 84

3. WORKED PERFORMED
 New Well Deepen: Orig WLS# _____
 Replacement: Original well log # _____
 Recondition: Original well log # _____

4. PROPOSED USE
 Domestic Irrigation Monitor Stock Rec
 Mining / Dewater Com / Ind Mun / QM
 Test / Other

5. WELL TYPE
 Auger Rotary RVC
 Air Mud Sonic
Other _____

6. LITHOLOGIC LOG

Material Encountered	Lost Circ.	Water Strata	From	To
Silt - dark plate			0	6
dark plate- blue silty clay			6	11
blue silty clay - silty clay			11	16
Silty clay			16	25
Plugged By Well Log 123156				
Note - Annular Material				
Gravel pack			0	10

9. INSTRUCTION

Depth Drilled: 25 Feet Depth Cased: 25 Feet

HOLE DIAMETER (BIT SIZE)

Form	Id
<u>24</u> Inches	<u>0</u> Feet
_____ Inches	_____ Feet
_____ Inches	_____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>8</u>	<u>6</u>	<u>SCH 40</u>	<u>0</u>	<u>25</u>
_____	_____	_____	_____	_____

ANNULAR MATERIALS

Sanitary Seal	X Yes	No		
<input checked="" type="checkbox"/> Neat Cement		<input type="checkbox"/>	to _____	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
<input type="checkbox"/> Cement Grout		<input type="checkbox"/>	to _____	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
<input type="checkbox"/> Concrete Grout		<input type="checkbox"/>	to _____	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
Bentonite Chips	<u>10</u>	<input type="checkbox"/>	to <u>12</u>	<input type="checkbox"/> Pumped <input checked="" type="checkbox"/> Poured
<input checked="" type="checkbox"/> Gravel Pack (> 0.2 in.)	<u>12</u>	<input type="checkbox"/>	to <u>25</u>	<input type="checkbox"/> Pumped <input checked="" type="checkbox"/> Poured
<input type="checkbox"/> Sand Pack (< 0.2 in.)		<input type="checkbox"/>	to _____	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
<input type="checkbox"/> Other, explain:		<input type="checkbox"/>	to _____	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured

PERFORATIONS:

Type of perforation: machine slot
Size of perforation: 0.032

From	To	From	To
<u>0</u> Feet	<u>25</u> Feet	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

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2015 SEP -14 AM 10:59
STATE ENGINEERS OFFICE

Date started: 21-Jul 20 15
Date completed: 21-Jul 20 15

7. WATER QUALITIES
Static water level: 15 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 Viking Drillers, Inc
Address 5950 Granite Lake Drive, Granite Bay, CA 95746

Nevada contractor's license number as issued by the State Contractor's Board: 0034680
Nevada well driller's license number as issued by the Nevada Division of Water Resources (on-site driller): 2361
Signed: Matthew J. Puma
Date: 8/25/15