

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

OFFICE USE ONLY
Log No. 123166
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. 39101
WELL NAME (if applicable): well#19

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 19N N/S 20 E
PERMIT/WAIVER NO. DW-116 021-030-09
Issued by Water Resources Current Parcel No.

Latitude 39.508161°N UTM E _____ NAD 27
Longitude 119.717825°W UTM N _____ x NAD 83/WGS 84

3. WORKED PERFORMED
 New Well Deepen: Orig WLF _____
 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
Packed silt-packed silty clay			0	6
packed silty clay-blue silty clay			6	12
blue silty clay-silty clay			12	19
silty clay - sand			19	25
Plugged By Well Log 125109				

9. INSTRUCTION

Depth Drilled: 25 Feet Depth Cased: 25 Feet

HOLE DIAMETER (BIT SIZE)

From	To
24 Inches	0 Feet 25 Feet
Inches	Feet
Inches	Feet

CASING SCHEDULE

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

Note - Annular Material

Material	From	To
Gravel pack	0	8

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>8</u> to <u>10</u>	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
<input checked="" type="checkbox"/> Gravel Pack [> 0.2 in.]	<u>10</u> to <u>25</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

Date started: 23-Jul 20 15
Date completed: 23-Jul 20 15

PERFORATIONS

Type of perforation: machine slot
Size of perforation: 0.032

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

7. WATER QUALITIES
Static water level: 10 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:	G.P.M.	Draw Down (Feet Below Static)	Recorded Time (Hours)
<input type="checkbox"/> Bailer			
<input type="checkbox"/> Pump			
<input type="checkbox"/> Air Lift			

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. [Signature]
Date: 8/28/15

RECEIVED
SEP 10 AM 11:00
STATE ENGINEERS OFFICE