



### NOTICE OF INTENT

No. 73713

Today's Date: 8-31-15

Intended Start Date: 9-4-15

Well ID (if applicable): See Attach

Type of Work to be Done: Drilling:  Deepening:  Reconditioning:  Plugging:

Is this a replacement well? Yes  No  If there is an existing well, what is the well log number? \_\_\_\_\_

Proposed use of well: Test Diameter of well: 5.5 inches Number of wells: 1

If this well is a domestic well, is it located within a water purveyor's service area? Yes  No  If yes, what is the DOM waiver: NA

If this is a monitor well required by another government agency, what is the facility ID number? NA Agency: NA

If this well is being completed under a waiver, please provide the corresponding waiver number: NA

If a water right is associated with this well, what is the permit number? 62256

Location of the well by Public Land Survey: NW 1/4 SW 1/4 Sec. 36 T 20 S R 22 E

Latitude: \_\_\_\_\_ UTM E  NAD 27

Longitude: \_\_\_\_\_ or UTM N  NAD 83 WGS 84

Address at well location: Reno

Assessor Parcel Number: \_\_\_\_\_

County: Storey Subdivision Name: \_\_\_\_\_

Name of Client: Tahoe-Reno Industrial Center, LLC

Address of Client: PO Box 838 Poway, CA 92074

Contractor's License Number: 0021976 On-Site Driller's License Number: 2450

Company Name and Address: Boast Longyear Co. PO Box 2748 Elko NV 89803

Need Log Forms  Need Inten Cards

(Rev. 1-14)

Driller's Signature: Allen Stone

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**DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES  
DIVISION OF WATER RESOURCES**

901 South Stewart Street, Suite 2002  
Carson City, Nevada 89701-5250  
(775) 684-2800 · Fax (775) 684-2811  
<http://water.nv.gov>

**NOTICE OF INTENT CARD  
APPROVAL FORM**

To: Boart Longyear - Aaron

Date: 09/01/2015

Facsimile No.: 775-753-5278

or E-mail Address: aaron.ogle@boartlongyear.com

This document was:  E-mailed  Faxed

NOI Card Number: 73712, 73713

Approved

Rejected (See reasons below)

Work performed	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Proposed use of well	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Intended start date	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Waiver/Permit number if applicable	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Well location (legal description, GPS coordinates)	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Parcel number	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Address at well location	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Permit number	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Waiver number or NDEP Facility ID Number	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Address of Client	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Name of client/owner	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Contractor's license number	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Onsite well driller's license number	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Drilling company name/address	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Driller's signature	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Replacement well	Yes	<input type="checkbox"/>	invalid	<input type="checkbox"/>

If yes, existing well must be plugged at time the replacement well is drilled, pursuant to NAC 534.300 Replacement Well.

Instructions: TEST HOLES MUST BE PLUGGED WITHIN 60 DAYS OF COMPLETION.

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Person reviewing NOI Card: Jake Echeverria (775) 684-2813

Date reviewed: 09/01/2015