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WELL DRILLER'S REPORT

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. 13674

1. OWNER Carson City Public Works ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS 3300 Butte Way Bennett Ave.
Carson City, Nevada 89701 Carson City, Nevada
 2. LOCATION 50' from SE 1/4 Sec. 33 T. 15 N/S R. 20 E Carson City County
 PERMIT NO. 56531 Waiver 349 (WS-349) NA NA
Issued by Water Resources Parcel No. Subdivision Name

3. WORK PERFORMED New Well Replace Recondition
 Deepen Abandon Other _____
 4. PROPOSED USE Domestic Irrigation Test
 Municipal/Industrial Monitor Stock
 5. WELL TYPE Cable Rotary RVC
 Air Other _____

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Sand		0	6	6
Sandy Clay		6	12	6
Clay Stringers/DG/Gravel		12	225	213
Hard Granite Bedrock		225	268	43
<u>Abandon #45b 7 BAG mix 4 yds</u>				
Set 2" Tremmie Pipe		0	240	
Pump Grout (7 bag mix)				
Pull 20'		240	220	
Pumping Grout				
Pull 20'		220	200	
Pumping Grout				
Pull 20'		200	180	
Pumping Grout				
Pull 20'		180	160	
Pumping Grout				
Pull 20'		160	140	
Pumping Grout				
Pull 20'		140	120	
Pumping Grout				
Pull 20'		120	100	
Pumping Grout				
Pull 20'		100	80	
Pumping Grout				
Pull & Grout to top		80	0	

Abandoning was done in accordance to the rules and regulations of the State of Nevada. Inspector was present.

8. WELL CONSTRUCTION
 Depth Drilled 268 Feet Depth Cased X Feet
 HOLE DIAMETER (BIT SIZE)
 From 8 1/2 Inches To 0 Feet 268 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
		NA		

Perforations:
 Type perforation NA
 Size perforation _____
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout
 Depth of Seal _____
 Placement Method: Pumped Poured
 Gravel Packed: Yes No 7 BAG MIX
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level DRY feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started 9/26, 1991
 Date completed 9/27, 1991

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift			
		<u>NA</u>	

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Humboldt Drilling And Pump Co. Contractor
 Address P.O. BOX 590 Contractor
Winnemucca, Nevada 89446-0590
 Nevada contractor's license number issued by the State Contractor's Board 015234
 Nevada driller's license number issued by the Division of Water Resources the on-site driller 1533
 Signed C. E. Copley
 By driller performing actual drilling on site or contractor
 Date 10-11-91