

OFFICE USE ONLY
 Log No. 38071
 Permit No. _____
 Basin 87
 17888

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

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. 17888

1. OWNER Same ADDRESS AT WELL LOCATION RD 9/Winners Corner
 MAILING ADDRESS _____
 2. LOCATION SW 1/4 NE 1/4 Sec 34 T 20 N R 20 E Washoe County
 PERMIT NO. 170 422 B 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 Other

6. LITHOLOGIC LOG m-16

Material	Water Strata	From	To	Thickness
<u>Asphalt</u>	<u>no</u>	<u>0</u>	<u>0.5</u>	<u>0.5</u>
<u>Sandy Gravel</u>	<u>no</u>	<u>0.5</u>	<u>2.5</u>	<u>2.0</u>
<u>Sandy Clay</u>	<u>no</u>	<u>2.5</u>	<u>5.0</u>	<u>2.5</u>
<u>Sandy Gravel</u>	<u>no</u>	<u>5.0</u>	<u>7.0</u>	<u>2.0</u>
<u>Silty Sand</u>	<u>yes</u>	<u>7.0</u>	<u>15.0</u>	<u>8.0</u>
<u>Clay</u>	<u>yes</u>	<u>15.0</u>	<u>24.0</u>	<u>9.0</u>

8. WELL CONSTRUCTION
 Depth Drilled 24 Feet Depth Cased 24 Feet
 HOLE DIAMETER (BIT SIZE)
 From 10 Inches To 24 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>4"</u>	<u>Sch. 40</u>	<u>PVC</u>	<u>0</u>	<u>24</u>

Perforations:
 Type perforation Factory Slot
 Size perforation 10x10
 From 8.5 feet to 24 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 6.5 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 6.5 feet to 24 feet

9. WATER LEVEL
 Static water level 13 feet below land surface
 Artesian flow N/A G.P.M. N/A P.S.I.
 Water temperature 68 °F Quality N/A

Date started 2-20, 1992
 Date completed 2-20, 1992

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>N/A</u>	

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Dana Anderson Contractor
 Address 1635 Bedford RD Contractor
RENO NEV. 89509
 Nevada contractor's license number issued by the State Contractor's Board _____
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1028
 Signed Dana Anderson
 By driller performing actual drilling on site or contractor
 Date 3/31/92

