WHITE—DIVISION OF WATER RESOURCES
CANARY—CLIENT'S COPY
PINK—WELL DRILLER'S COPY

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

STATE OF NEVADA
DIVISION OF WATER RESOURCES

WELL DRILLER'S REPORT

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

OFFICE USE ONLY
Log No. 45010
Permit No.
Basin 104

NOTICE OF INTENT NO. 25476

1. OWNER Ken & Connie Creech
MAILING ADDRESS 4071 Center St. Carson City NV 89701
ADDRESS AT WELL LOCATION 4071 Center St. Carson City NV. 89701

2. LOCATION NE ¼ SW ¼ Sec. 09 T. 15 N/S R. 20 E. Carson County
PERMIT NO. (Issued by Water Resources) 9-142-3 (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	Thickness
Tried to Pull Old 5" well and Wasn't Able to.				
Pumped Well full of Neat Cement from Bottom to Surface				
Old Well Was		90'	Deep	

Date started 6-23, 1994
Date completed 6-23, 1994

7. WELL TEST DATA
TEST METHOD: ☐ Bailer ☐ Pump ☐ Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)

8. WELL CONSTRUCTION
Depth Drilled ____ Feet Depth Cased ____ Feet

HOLE DIAMETER (BIT SIZE)

	From	To
Inches	Feet	Feet
Inches	Feet	Feet
Inches	Feet	Feet

CASING SCHEDULE

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

Perforations:
Type perforation
Size perforation
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet

Surface Seal: ☐ Yes ☑ No
Depth of Seal N/A
Placement Method: ☐ Pumped ☐ Poured
Seal Type: ☐ Neat Cement ☐ Cement Grout ☐ Concrete Grout

Gravel Packed: ☐ Yes ☐ No
From N/A feet to ____ feet

9. WATER LEVEL
Static water level 85 feet below land surface
Artesian flow ____ G.P.M. 2 P.S.I.
Water temperature Cold °F Quality Bad

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name ____ Contractor
Address ____ Contractor

Nevada contractor's license number issued by the State Contractor's Board 31839
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1905
Signed Michael L. Hack
By driller performing actual drilling on site or contractor
Date 6-24-94

(Rev. 3-91) USE ADDITIONAL SHEETS IF NECESSARY (O)-627