Washoe Co. Health Permit #5096

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. 45747
Permit No.
Basin 089

NOTICE OF INTENT NO. 21567

1. OWNER Jim Fowlston
MAILING ADDRESS 1640 E. Guffey Dr.
Carson City, NV 89704

ADDRESS AT WELL LOCATION same

2. LOCATION SW ¼ SW ¼ Sec. 30 T 17N N/S R 20 E Washoe County

PERMIT NO. (Issued by Water Resources) 050-295-12 (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
This well was undersized and measured approx. 5 9/16 I.D. We received a waiver requiring perforating the well casing due to its size. We abandoned the well by filling with tremie tube from the bottom of the well to the top using a mixture of neat cement. The well measured approx. 100' total depth. Static water level prior to abandonment was approx. 72'. We used approximately 1 yard neat cement mix.				

Date started 7-28, 19 94
Date completed 7-28, 19 94

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
Placement Method: ☐ Pumped ☐ Poured

Seal Type: ☐ Neat Cement ☐ Cement Grout ☐ Concrete Grout

Gravel Packed: ☐ Yes ☐ No
From ..... feet to ..... feet

9. WATER LEVEL

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

10. DRILLER'S CERTIFICATION

This well was drilled under my supervision and the report is true to the best of my knowledge.

Name MacKay Pump & Geothermal, Inc.
Contractor

Address 1600 Mt. Rose Hwy.
Contractor
Reno, NV 89511

Nevada contractor's license number issued by the State Contractor's Board 23096

Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1719

Signed R. Brian MacKay
By driller performing actual drilling on site or contractor

Date 7-29-'94

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