

Silver State Speedway Test Hole #2

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

STATE OF NEVADA
DIVISION OF WATER RESOURCES

OFFICE USE ONLY
Log No. 46251
Permit No. _____
Basin. 104

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. 26918

1. OWNER Carson City ADDRESS AT WELL LOCATION South of Steward facility by Silver State Speedway
MAILING ADDRESS 3300 Butti Way Bldg #9, Carson City, NV 89710
2. LOCATION SE 1/4 NE 1/4 Sec. 5 T. 14 N. S. R. 20 E. Carson County
PERMIT NO. 60205T 60206T Issued by Water Resources Parcel No. _____ Subdivision Name Silver State Speedway

3. WORK PERFORMED Test Hole
 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
DG w/sand, traces of clay w/some cobbles		0	25	25
DG w/some sand		25	185	160
DG & sand w/some light brown clay		185	205	20
light brown sandy clay		205	225	20
DG w/some clay pockets		225	282	57
Hard granite w/some small clay streaks		282	509	227
Hole left open- will be cased with 6" casing & test pumped next week				

8. WELL CONSTRUCTION
Depth Drilled 509 Feet Depth Cased _____ Feet
HOLE DIAMETER (BIT SIZE)
From 9 7/8 Inches To 0 Feet 509 Feet
Inches Feet Feet
Inches Feet Feet

CASING SCHEDULE

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

Perforations:
Type perforation N/A
Size perforation _____
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
Depth of Seal N/A Neat Cement
Placement Method: Pumped Concrete Grout
 Poured
Gravel Packed: Yes No
From _____ feet to _____ feet

9. WATER LEVEL
Static water level _____ feet below land surface
Artesian flow N/A 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 Humboldt Drilling & Pump Co., Inc. Contractor
Address P. O. Box 590 Winnemucca, NV 89446 Contractor
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 1562
Signed C. C. Eppler
By driller performing actual drilling on site or contractor
Date 10-6-94

Date started Sept. 26, 1994
Date completed Sept. 29, 1994

7. WELL TEST DATA

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