

Silver Oak 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. 46257
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. 26917

1. OWNER Carson City ADDRESS AT WELL LOCATION Silver Oak
MAILING ADDRESS 3300 Butti Way Subdivision in NW Carson City
Bldg #9, Carson City, NV 89710

2. LOCATION SE 1/4 NE 1/4 Sec. 6 T. 15 N. R. 20 E Carson County Silver Oak
PERMIT NO. 602005 60205T Issued by Water Resources Parcel No. _____ Subdivision Name _____

3. WORK PERFORMED Test Hole

New Well Replace Recondition Domestic Irrigation Test Cable Rotary RVC
 Deepen Abandon Other _____ Municipal/Industrial Monitor Stock Air Other _____

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Silt-topsoil		0	8	8
DG-course sand		8	21	13
Hard compacted sand		21	24	3
DG & clay		24	100	76
DG & coarse sand		100	300	200
DG boulders & coarse sand		300	380	80
Hard compacted sandy granite w/some fractures		380	509	129

This hole left open temporarily to obtain drawdown test while pumping test hole #3

Will be abandoned after test on hole #3 are completed.

8. WELL CONSTRUCTION

Depth Drilled 548 Feet Depth Cased _____ Feet

HOLE DIAMETER (BIT SIZE)

From	To
9 7/8 Inches	0 Feet 548 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 _____
Size perforation N/A

From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet

Surface Seal: Yes No Seal Type: Neat Cement Cement Grout Concrete Grout
Depth of Seal N/A

Placement Method: Pumped 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 Contractor
Winnemucca, NV 89446

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 1713

Signed C. E. Esplan
By driller performing actual drilling on site or contractor
Date 10-6-94

Date started Sept. 27 1994
Date completed Oct. 1 1994

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

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