Washoe Co. Health Permit #5124

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. ~~38-695~~ 46519
Permit No.
Basin 091

NOTICE OF INTENT NO. 21569

1. OWNER Bart Jacka
MAILING ADDRESS P.O. Box 1290
Verdi, NV 89439

ADDRESS AT WELL LOCATION
650 Riverdale Circle
Verdi, NV 89439

2. LOCATION NE ¼ SE ¼ Sec. 7 T 19N N/S R 18 E Washoe County
PERMIT NO. (Issued by Water Resources) 38-695-16 (Parcel No.) Riverdale Subdivision Unit 1 lot 16 Blk C (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 approximately 6 5/8" x 290'. We perforated the casing at approximately 1' intervals with 4 perforations each at 90° apart. Perforations continued from bottom to approximately 62' where we hit the sanitary seal. Approximately 6 1/2 yards of neat cement was pumped by ~~xxxxx~~ tremie tube to the bottom and filled to the top of casing. Static water level was 164' from surface. This well was abandoned because we were unsuccessful in deepening it to obtain more water. This well had yielded up to 30 gpm at different times during its life. However, we were unable to deepen it and drilled a replacement well.				

Date started 8-20~~X~~ 19 94
Date completed 8-30~~X~~ 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. Bruce MacKay (By driller performing actual drilling on site or contractor)
Date 8-20-'94

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