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. 50322
Permit No.
Basin 097

NOTICE OF INTENT NO. 29017

1. OWNER Washoe County Utility
MAILING ADDRESS P.O. Box 11130
Reno, NV 89520

ADDRESS AT WELL LOCATION Fish Springs. First Fault Test Well
Previous intent #13664

2. LOCATION NW ¼ NW ¼ Sec. 31 T. 26N N/S R. 19 E. Washoe County
PERMIT NO. W315, W319 (Issued by Water Resources) 074-070-28 (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 |
|---|---|---|---|---|
| On this date we installed and welded a 2" x 21' black iron pipe with 1/4" x 8" plate on the bottom and riser clamp at the top for centering and support, into the 8 5/8" well. We then poured 10 gallons of gravel into the well, the filled the remainder with approximately 8 sacks of Redi-Mix concrete to the top of the 2". WE then installed a "Royer"locking well cap with padlock. | | | | |
| Static water was not measured, but was greater that 21'. | | | | |

Date started 10-19, 19 95
Date completed 10-19, 19 95

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 10-20-'95

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