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

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. 69560
Permit No.
Basin 84

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

25DAD1

NOTICE OF INTENT NO. 39402

1. OWNER Bo & Debbie Collins
MAILING ADDRESS ~~2500~~ 5455 Twin Springs Rd.
Reno, Nevada 89510

ADDRESS AT WELL LOCATION ~~2500~~ 5455 Twin Springs Rd.
Reno, Nevada 89510

2. LOCATION ne ¼ se ¼ Sec. 25 T. 22n N/S R. 21 E. Washoe County
PERMIT NO. (Issued by Water Resources) 077-160-11 (Parcel No.) Veloumino U. Unit 1 25.2.1.10 (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
Perforate casing				
from 50 to 170				
fill casing with				
3 yds. of grout				
See also log # 68549				
Plugging of				
Log # 43121				

Date started 9-27-97, 19
Date completed 9-28-97, 19

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 Points West Drilling (Contractor)
Address P.O. Box 178 (Contractor)
West Point, Ca. 95255
Nevada contractor's license number issued by the State Contractor's Board 39825
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1974
Signed (By driller performing actual drilling on site or contractor)
Date 10-1-97

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