

OFFICE USE ONLY
Log No. 79069
Permit No. 87
Basin 1
NOTICE OF INTENT NO. 42915

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

1. OWNER Airport Authority of Washoe Co. ADDRESS AT WELL LOCATION Airport Maintenance Facility
MAILING ADDRESS P.O. Box 12490 Reno, NV. 89510 Air Gurd Way, Reno, NV.
2. LOCATION NE 1/4 SE 1/4 Sec. 19 T. 19 N/S R. 20 E Washoe County Washoe
PERMIT NO. _____ Issued by Water Resources _____ 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	Thick-ness	
Monitor wells #1, 2, 3, 4 and 5 were 2" pvc, wells all constructed with 5' of blank casing on top with 20' of screen on bottom. We mixed and pumped 5 bags of Portland type II cement and approx 30 gallons of water to fill the 2" wells.					
RW-1 (recovery well) was a 6" pvc well constructed with 5' of blank and 20' of screen. This well required approx 4.5 cubic feet of neat cement.					
MW	SWL	Depth	Size	Blank	Screen
1	7.56'	20.5'	2"	5'	20'
2	7.59'	20.38'	2"	5'	20'
3	7.61'	20.45'	2"	5'	20'
4	7.64'	20.36'	2"	5'	20'
5	7.69'	20.45'	2"	5'	20'
RW					
1	7.65'	20.5'	6"	5'	20'

See attached site map and well const. logs

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 slotted
Size perforation .020
From 5' feet to 20' feet
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet

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

9. WATER LEVEL
Static water level 7.56 to 7.7' 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 Carson Pump Contractor
Address 1401 North Roop St. Contractor
Carson City, NV. 89701
Nevada contractor's license number issued by the State Contractor's Board 39920
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1482
Signed Dan Trampe
By driller performing actual drilling on site or contractor
Date November 11, 1999

Date started 11-9, 1999
Date completed 11-9, 1999

7. WELL TEST DATA

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

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WATER ENGINEERS OFFICE