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. 79664
Permit No.
Basin 88

NOTICE OF INTENT NO. 44427

1. OWNER Thomas Clydesdale
MAILING ADDRESS 16750 Mt. Rose Hwy
Reno, NV 89511

ADDRESS AT WELL LOCATION 16750 Mt. Rose Hwy

2. LOCATION NW 1/4 NW 1/4 Sec. 3 T 17N N/S R 19E E Washoe County
PERMIT NO. WaCo#6605 Issued by Water Resources | 047-162-08 Parcel No. | Subdivision Name

3. WORK PERFORMED
[ ] New Well [ ] Replace [ ] Recondition
[ ] Deepen [X] Abandon [ ] Other

4. PROPOSED USE
[X] 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 abandoned the 6 5/8" water well. We perforated from bottom to 25' at 4 around and at 1 foot intervals using a Mills Knife. At 25' we hit the sanitary seal. We pumped approximately 1.5 cu. yards of neat cement mixed at 5.2 gallons per sack of cement and pumped using tremie pipe from bottom to top. After pumping the 1.5 cu. yards of neat cement, the cement dropped to about 20'. We then poured about 5 cu. ft. of cement grout into the top of the well to bring it flush with grade.				

Date started 5/12/2000 , 19__
Date completed 5/19/2000 , 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)
6 5/8	12.92	.188	0	84

Perforations:
Type perforation Mills Knife
Size perforation Puncture
From 84 feet to 25 feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet

Surface Seal: [ ] Yes [X] No
Depth of Seal
Placement Method: [X] Pumped [ ] Poured
Seal Type: [X] Neat Cement [ ] Cement Grout [ ] Concrete Grout

Gravel Packed: [ ] Yes [X] No
From ____ feet to ____ feet

9. WATER LEVEL
Static water level 35 feet below land surface
Artesian flow ____ G.P.M. ____ P.S.I.
Water temperature cold °F Quality not tested

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.

Name Bruce MacKay Pump & Well Service, 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 5/19/00

USE ADDITIONAL SHEETS IF NECESSARY