

OFFICE USE ONLY  
 Log No. 82464  
 Permit No. \_\_\_\_\_  
 Basin. 104

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

NOTICE OF INTENT NO. 96907

1. OWNER CITY OF CARSON CITY ADDRESS AT WELL LOCATION COLLEGE PARK RESEARCH & HOT SPRINGS BLDG.  
 MAILING ADDRESS 3303 BUTTE WAY BLDG 1 RESEARCH & HOT SPRINGS BLDG.  
CARSON CITY, NV. 89701 Well # 18  
 2. LOCATION 1/4 SW 1/4 Sec 5 T 15 N/S R 20 E CARSON CITY County  
 PERMIT NO. DEW 083 Issued by Water Resources Parcel No. Subdivision Name

3. WORK PERFORMED  
 New Well  Replace  Recondition  
 Deepen  Abandon  Other \_\_\_\_\_  
 4. PROPOSED USE  
 Domestic DEWATER  Irrigation  Test  
 Municipal/Industrial  Monitor  Stock  
 5. WELL TYPE  
 Cable  Rotary  RVC  
 Air  Other ALBERT

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Pull 8" casing; Gravel from 10'-35'				
Cement grout slurry from 0-10'				
RECEIVED COUNTY CLERK MAY 2 2000				

8. WELL CONSTRUCTION  
 Depth Drilled 35 Feet Depth Cased 35 Feet  
 HOLE DIAMETER (BIT SIZE)  
 From 0 To 35  
24 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)
<del>8</del>	<del>6</del>	<del>3/16</del>	<del>0</del>	<del>35</del>

Perforations:  
 Type perforation: slot  
 Size perforation: 250's  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  
 Neat Cement  
 Cement Grout  
 Concrete Grout  
 Depth of Seal: 10'  
 Placement Method:  Pumped  Poured  
 Gravel Packed:  Yes  No  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

9. WATER LEVEL  
 Static water level 6 feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature \_\_\_\_\_ °F Quality \_\_\_\_\_

Date started \_\_\_\_\_, 19\_\_\_\_  
 Date completed May 2000, 19\_\_\_\_

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			

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.  
 Name Viking Drillers, Inc. Contractor  
 Address 801 Northport Drive Contractor  
West Sacramento, CA. 95691  
 Nevada contractor's license number 00044407  
 issued by the State Contractor's Board.  
 Nevada driller's license number issued by the M-2091  
 Division of Water Resources, the on-site driller.  
 Signed [Signature]  
 By driller performing actual drilling on site or contractor  
 Date 10-9-00