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. 82788
Permit No.
Basin 92B

NOTICE OF INTENT NO. 44495

1. OWNER Johanna Hagar
MAILING ADDRESS 700 Winchester
Reno, NV 89506

ADDRESS AT WELL LOCATION 700 Winchester

2. LOCATION SE 1/4 SE 1/4 Sec. 10 T 20N N/S R 19E E Washoe County
PERMIT NO. WaCo#6835 (Issued by Water Resources) 552-115-04 (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 abandoned the 6" x 130' deep domestic water well. We perforated from 115'-55' where we hit a sanitary seal. We perforated at 4 around and at 1 foot intervals. We then pumped approximately 1.75 cu. yards of neat cement mixed at 5.2 gallons of water per sack using tremie pipe and filled from the bottom up to top. We cut the casing off below grade.				

RECEIVED
01 APR 27 AM 11:05
STATE ENGINEER'S OFFICE

Date started 3/23/2001, 19__
Date completed 3/23/2001, 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	2	130

Perforations:
Type perforation Mills Knife
Size perforation Puncture
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 55
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 30 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 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 3/24/01

USE ADDITIONAL SHEETS IF NECESSARY