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. 35067
Permit No.
Basin 87

NOTICE OF INTENT NO. 48052

1. OWNER Washoe Co. School District-Traner Mid School.
MAILING ADDRESS 1700 Carville Dr.
Reno, NV 89503

ADDRESS AT WELL LOCATION 1700 Carville Dr.

2. LOCATION SE 1/4 ____ 1/4 Sec. 01 T 19N N/S R 19E E ____ Washoe County
PERMIT NO. ____ Issued by Water Resources | 008-145-01 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 a 60' x 2" monitor well. There was no water in the well. We proceeded to pour approxiately 2 sacks of neat cement mixed at 5.2 gallons/sack into the well. We removed the monument and filled the top with soil.				

Date started 12/14/2001, 19__
Date completed 12/14/2001, 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 60 Feet Depth Cased 60 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)
2		Sch 40	0	60

Perforations:
Type perforation Factory screen
Size perforation .020
From 46 feet to 60 feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet

Surface Seal: ☒ Yes ☐ No
Depth of Seal 41
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 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 12/18/01

USE ADDITIONAL SHEETS IF NECESSARY