

STATE OF NEVADA
 DIVISION OF WATER RESOURCES
WELL DRILLER'S REPORT

OFFICE USE ONLY
 Log No. 86208
 Permit No. _____
 Basin 104

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. 48220

1. OWNER Carson City Utilities District ADDRESS AT WELL LOCATION 2944 Kings Canyon Road,
 MAILING ADDRESS 3505 Butti Way Carson City, NV.
Carson City, NV 89701

2. LOCATION NE 1/4 SW 1/4 Sec. 7 T 15N N/S R 20E E Carson City County
 PERMIT NO. W-543 007-061-11 N/A
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	Thickness
Surface casing was cemented in as a precaution and was not pulled as part of abandonment.				
Abandoned by pumping abantonite, via tremie, from T.D. to 73.5', poured hole plug to 20', and capped with neat cement.				
Quantities Used:				
Cement: 7.1 cu.ft.				
Hole plug: 8.3 cu.ft.				
Abantonite: 93.2 cu.ft.				

8. WELL CONSTRUCTION
 Depth Drilled 335 Feet Depth Cased 20 Feet

HOLE DIAMETER (BIT SIZE)

From		To	
<u>12.25</u> Inches	<u>0</u> Feet	<u>20</u> Feet	<u>335</u> Feet
<u>6.25</u> Inches	<u>20</u> Feet		

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>8.625</u>	<u>22.36</u>	<u>0.250</u>	<u>0</u>	<u>20</u>

Perforations:

Type perforation _____
 Size perforation _____

From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No
 Depth of Seal 20'

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 73.5 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 Lang Exploratory Drilling Contractor
 Address P.O. Box 5279 Contractor
Elko, NV 89802-5279

Nevada contractor's license number issued by the State Contractor's Board 0021976
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2084

Signed Vince Wardie
 By driller performing actual drilling on-site or contractor
 Date 1/3/02

Date started 12/17/2001, 19____
 Date completed 12/19/2001, 19____

7. WELL TEST DATA

TEST METHOD:	TEST METHOD:		Time (Hours)
	G.P.M.	Draw Down (Feet Below Static)	
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	<u>30</u>	<u>Not Meas.</u>	

B.S.T.C.