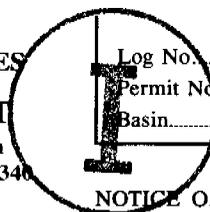


WELL DRILLER'S REPORT

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



PRINT OR TYPE ONLY  
 DO NOT WRITE ON BACK

NOTICE OF INTENT NO. 48821

1. OWNER Washoe County IDA ADDRESS AT WELL LOCATION 575 W. Grand Ave  
 MAILING ADDRESS 21936 University Way Reed NV  
 2. LOCATION SW 1/4 SE 1/4 Sec 13 T 19 N R 19 E Washoe County  
 PERMIT NO. 151030240 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 SCALE

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>Rock Base</u>		<u>0</u>	<u>2</u>	<u>2</u>
<u>Clay</u>		<u>2</u>	<u>13</u>	<u>11</u>
<u>Sand or Gravel</u>		<u>13</u>	<u>16</u>	<u>3</u>
<u>Sand</u>	<u>yes</u>	<u>16</u>	<u>17</u>	<u>1</u>
<u>Sand Clay &amp; Cbbles</u>		<u>17</u>	<u>26</u>	<u>9</u>
<u>Sand</u>	<u>yes</u>	<u>26</u>	<u>27</u>	<u>1</u>
<u>Clay sand &amp; cbbles</u>		<u>27</u>	<u>39</u>	<u>12</u>
<u>Plugged back</u>				
<u>from 39 to 50</u>				
<u>with Bentonite</u>				
<u>chips</u>				

8. WELL CONSTRUCTION  
 Depth Drilled 37 Feet Depth Cased 30 Feet  
 HOLE DIAMETER (BIT SIZE)  
 From 0 Feet To 37 Feet  
47 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)
<u>2</u>		<u>5/16 PVC</u>	<u>0</u>	<u>30</u>

Perforations:  
 Type perforation slotted  
 Size perforation 1/2"  
 From 216 feet to 30 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 Surface Seal:  Yes  No Seal Type:  
 Depth of Seal 8  Neat Cement  
 Placement Method:  Pumped  Cement Grout  
 Poured  Concrete Grout  
 Gravel Packed:  Yes  No  
 From 30 feet to 8 feet

9. WATER LEVEL  
 Static water level 16 feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature \_\_\_\_\_ °F Quality \_\_\_\_\_

Date started 3/15 19  
 Date completed 3/15 19

7. WELL TEST DATA

TEST METHOD: <input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift			
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)	

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.  
 Name Parsonic Corp Contractor  
 Address 305 E. Comstock Contractor  
Chandler A2  
 Nevada contractor's license number issued by the State Contractor's Board 0051705  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1677  
 Signed J.P. Dunlop By driller performing actual drilling on site or contractor  
 Date 3/15/03