

OFFICE USE ONLY
 Log No. 88804
 Permit No. 087
 E sin. 087
 NOTICE OF INTENT NO. 46046

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

WELL DRILLER'S REPORT

Please complete this form in its entirety in accordance with NRS 534.179 and NAC 534.340

1. OWNER City of Reno Public Works Dept - REORAC ADDRESS AT WELL LOCATION South side of LAKE ST.
 MAILING ADDRESS 264 Kenstave Ave
Reno, NV 89503
 2. LOCATION NE 1/4 SE 1/4 Sec 11 T. 19 N. R. 19 E. WASHOE County
 PERMIT NO. SE NE 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 SOLIC

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>SMALL ROCKS + GRAVEL</u>		<u>0</u>	<u>6</u>	
<u>SAND + GRAVEL</u>		<u>6</u>	<u>16</u>	
<u>cobbles</u>		<u>16</u>	<u>19</u>	
<u>SAND, SILT, GRAVEL</u>		<u>19</u>	<u>25</u>	
<u>SILTS + SAND</u>		<u>25</u>	<u>35</u>	

8. WELL CONSTRUCTION
 Depth Drilled 35 Feet Depth Cased 35 Feet
 HOLE DIAMETER (BIT SIZE)
6 inches From 0 Feet To 35 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>sch 40</u>		<u>0</u>	<u>25</u>

Plugged by Well Log # 112380

Perforations:
 Type perforation factory
 Size perforation 020
 From 25 feet to 35 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 5 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 35 feet to 23 feet

9. WATER LEVEL
 Static water level 27 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started 8-24-03, 20...
 Date completed 8-24-03, 20...
 1011-11-31
 8-24-03
 8-24-03

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 BOB LANGRISH Contractor
 Address Box 1000 Contractor
Dayton, NV 89403
 Nevada contractor's license number 0010157
 issued by the State Contractor's Board
 Nevada driller's license number issued by the m-2198
 Division of Water Resources, the on-site driller.
 Signed Walt Colubert
 By driller performing actual drilling on site or contractor
 Date 3-24-03