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. 87222
Permit No.
Basin 92A

NOTICE OF INTENT NO. 39088A

1. OWNER Washoe Co. Airport Authority
MAILING ADDRESS P.O. Box 12490
Reno, NV 89510-2490

ADDRESS AT WELL LOCATION
Stead Airport Well #B1

2. LOCATION SE 1/4 NW 1/4 Sec. 29 T 21N N/S R 19E E Washoe County
PERMIT NO. M/0-187 (Issued by Water Resources) | 86-024-09 (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 2" monitor well by pressure grouting approx. 1.3 sacks of neat cement by tremie pipe.				

RECEIVED 93 JUL 14 AM 9:45 STATE ENGINEER'S OFFICE

Date started 7/9/98 , 19__
Date completed 7/9/98 , 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 31.5 Feet Depth Cased 31.5 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	31.5

Perforations:
Type perforation Factory
Size perforation .020
From 21 feet to 31 feet
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet

Surface Seal: ☐ Yes ☒ No
Depth of Seal _____
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 31 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 7-10-98