

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

OFFICE USE ONLY
Log No. 908179
Permit No. _____
Basin 088

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. 49301

1. OWNER Friedwardt Winterberg ADDRESS AT WELL LOCATION 5395 Goldenrod
MAILING ADDRESS 5395 Goldenrod
Reno, NV 89511

2. LOCATION SW 1/4 NE 1/4 Sec. 2 T 17N N/S R 19E E Washoe County
PERMIT NO. R-451 045-573-10
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	Thick-ness					
On this date we abandoned a 6 5/8" x 90' domestic water well. We didn't perforate the well due to access and waiver from state-R-451. We pumped approximately 1.5 cu yards of neat cement mixed 5.2 gallons water/sack from bottom to top of well. We then cut off the top 2' of casing.									
Washoe Permit #WL030186									
<p style="writing-mode: vertical-rl; transform: rotate(180deg);">RECEIVED OCT 23 AM 11:37 STATE ENGINEERS OFFICE</p>									

8. WELL CONSTRUCTION
Depth Drilled _____ Feet Depth Cased 90 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)
<u>6 5/8</u>	<u>12.92</u>	<u>.188</u>	<u>0</u>	<u>90</u>

Perforations:
Type perforation Factory
Size perforation 3/32 x 3"

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

Surface Seal: Yes No Seal Type:
Depth of Seal 50 Neat Cement
Placement Method: Pumped Cement Grout
 Poured Concrete Grout

Gravel Packed: Yes No
From _____ feet to _____ feet

9. WATER LEVEL
Static water level 84 feet below land surface
Artesian flow _____ G.P.M. _____ P.S.I.
Water temperature _____ °F Quality _____

Date started 10/16/2003 . 19
Date completed 10/16/2003 . 19

7. WELL TEST DATA

TEST METHOD:	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 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 10/17/03