

STATE OF NEVADA  
 DIVISION OF WATER RESOURCES

OFFICE USE ONLY  
 Log No. 7343  
 Permit No. \_\_\_\_\_  
 Basin 89



PRINT OR TYPE ONLY  
 DO NOT WRITE ON BACK

WELL DRILLER'S REPORT

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

NOTICE OF INTENT NO. **51690**

1. OWNER Don Potter ADDRESS AT WELL LOCATION 4265 Gander Ln.  
 MAILING ADDRESS 4265 Gander Ln.  
Washoe Valley, NV 89704

2. LOCATION NW 1/4 NE 1/4 Sec. 5 T 17N N/S R 20E E Washoe County  
 PERMIT NO. 050-435-18 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
Fill		106	124	18
Weatherd granite		124	149	25
Fracture	x	149	150	1
Weatherd granite		150	160	10
Fracture	x	160	165	5
Weatherd granite		165	181	16
Soft zone fractured rock	x	181	185	4
Hard granite		185	201	16

Washoe county well permit # WL 0400112

8. WELL CONSTRUCTION  
 Depth Drilled 201 Feet Depth Cased 201 Feet

HOLE DIAMETER (BIT SIZE)  
 From 6 1/8 Inches 106 Feet To 201 Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>5</u>	<u>10.79</u>	<u>.188</u>	<u>101</u>	<u>201</u>

Perforations:  
 Type perforation Machine cut  
 Size perforation 3/32 x 3

From 141 feet to 201 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

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

Gravel Packed:  Yes  No  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

9. WATER LEVEL  
 Static water level 86 feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature Cool °F Quality Not tested

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 923  
 Signed R. Bruce MacKay  
 By driller performing actual drilling on-site or contractor  
 Date 6/2/2004

Date started 6/2/2004 .19  
 Date completed 6/3/2004 .19

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	<u>30</u>		<u>3</u>

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