

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



OFFICE USE ONLY

Log No. 99092
 Permit No. _____
 Basin 884

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. **55335**

1. OWNER **Dennis & Christy Magers**
 MAILING ADDRESS **8590 Bella Oaks Dr**
Sparks, NV 89436

ADDRESS AT WELL LOCATION **3415 Basque Oven Rd.**

2. LOCATION **N1/2 1/4 NE 1/4 Sec. 19 T 21N**
 PERMIT NO. **076-650-08**

N/S R **22E** E **Washoe** County

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	Thickness
Top soil		0	1	1
Brown clay		1	16	15
Brown sandy clay		16	52	36
Black volcanic rock		52	59	7
Brown sandy clay		59	110	51
Soft zone	x	110	117	7
Gray sandy clay		117	124	7
Soft zone	x	124	125	1
Gray sandy clay		125	130	5
Soft zone	x	130	134	4
Gray sandy clay		134	191	57
Soft zone	x	191	196	5
Gray sandy clay		196	207	11
Brown sandy clay		207	216	9
Gray sandy clay		216	221	5
Soft zone		221	227	6
Gray sandy clay		227	254	27
Soft zone	x	254	257	3
Gray sandy clay		257	300	43

Washoe County Well Permit # **WL 050175**

Date started **11/14/2005**, 19
 Date completed **11/18/2005**, 19

7. WELL TEST DATA

TEST METHOD:	Bailer	Pump	Air Lift
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)	
18		3	

8. WELL CONSTRUCTION

Depth Drilled **300** Feet Depth Cased **300** Feet

HOLE DIAMETER (BIT SIZE)

	From	To
10 5/8 Inches	0	50
8 5/8 Inches	50	300

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	12.92	.188	+2	300

Perforations:

Type perforation **Machine cut**
 Size perforation **3/32 x 3**

From 120 feet to 140 feet
From 180 feet to 200 feet
From 260 feet to 280 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 **50** feet to **300** feet

9. WATER LEVEL

Static water level **60** 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 off-site or contractor
 Date **11/21/2005**