



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. 99922
 Permit No. _____
 Basin 084

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

NOTICE OF INTENT NO. **57403**

1. OWNER Brian DiMambro
 MAILING ADDRESS 4104 Kietzke Ln. #89
Reno, NV 89502
 ADDRESS AT WELL LOCATION 645 Serenity Place
Palomino Valley

2. LOCATION SE 1/4 NE 1/4 Sec. 13 T 21N N/S R 21E E Washoe County
 PERMIT NO. NC 076-080-46 Parcel No. Palomino Valley Unit # A 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
Top soil Rock		0	1	1
Brown clay		1	3	2
Brown sandy clay with gravel and boulders		3	18	15
Brown sandy clay		18	110	92
Dark brown sandy clay		110	118	8
Dark gray sandy clay		118	129	11
Gray volcanic rock		129	145	16
Brown volcanic rock		145	155	10
Soft zone	X	155	158	1
Brown volcanic rock		156	163	7
Gray volcanic rock		163	245	82
Fracture	X	245	300	55

Washoe County Permit # WL060065

8. WELL CONSTRUCTION
 Depth Drilled 300 Feet Depth Cased 300 Feet
 HOLE DIAMETER (BIT SIZE)

Inches	From	To
<u>10 5/8</u>	<u>0</u>	<u>50</u>
<u>8 5/8</u>	<u>50</u>	<u>300</u>

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>+2</u>	<u>300</u>

Perforations:
 Type perforation Machine cut
 Size perforation 3/32 x 3
 From 235 feet to 295 feet
 From _____ feet to _____ feet
 Surface Seal: Yes No
 Depth of Seal 50
 Placement Method: Pumped Poured
 Seal Type: Neat Cement Cement Grout Concrete Grout
 Gravel Packed: Yes No
 From 50 feet to 300 feet

9. WATER LEVEL
 Static water level 73 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 5/2/2006

Date started 4/14/2006, 19____
 Date completed 5/1/2006, 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 checked="" type="checkbox"/> Air Lift	<u>30</u>		<u>3</u>