

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

Office use only  
 Log No. **101080**  
 Permit No. \_\_\_\_\_  
 Basin **087**



NOTICE OF INTENT NO **54467**  
~~4269 Honeywood~~  
**4268 Whistlewood**

1. OWNER **Frank Warren**  
 MAILING ADDRESS **PO BOX 914**  
**Rancho Santa Fe, CA**

ADDRESS AT WELL LOCATION

2. Location **SW 1/4 NW 1/4 Sec 26 T 19 N R 19E**  
 PERMIT NO. **40310** PARCEL NO. **2364805 2364012**

Washoe County

SUBDIVISION NAME

3. WORK PERFORMED			4. PROPOSED USE			5. WELL TYPE		
New Well	Replace	<input checked="" type="checkbox"/> Recondition	<input checked="" type="checkbox"/> Geothermal	Irrigation	Test	Cable	<input checked="" type="checkbox"/> Rotary	RVC
Deepen	Abandon	Other	Municipal/Industrial	Monitor	Stock	Air	Other	Mud

6. LITHOLOGIC LOG				
Material	Water Strata	From	To	Thickness
Brushed well & than installed 140' of 8 5/8" by 188 wall casing with 2 K-packers on the bottom.				0
A tremie was installed to bottom and pumped 4 yards of neat cement with retarder.				0
Neat cement went down over night.				0
Capped with sand grout.				0
Tripped to bottom and cleaned out well to bottm.				0

8. WELL CONSTRUCTION				
Depth Drilled	feet	Depth Cased	140 feet	HOLE DIAMETER (BIT SIZE)
	From	To		
	0			inches 0 feet feet
				inches feet feet
				inches feet feet
CASING SCHEDULE				
Size O.D.	Weight/Ft.	Wall Thickness	From	To
(Inches)	(Pounds)	(Inches)	(Feet)	feet
8 5/8	16.94	188	+ 1 1/2	120
Perforations:				
Type Perforation				
Size perforation				
From	feet to			feet
From	feet to			feet
From	feet to			feet
From	feet to			feet
From	feet to			feet
Surface Seal	<input checked="" type="checkbox"/> YES	No		Seal Type:
Depth of Seal	140 feet			<input checked="" type="checkbox"/> Neat Cement
	<input checked="" type="checkbox"/> Pumped			Cement Grout
	<input type="checkbox"/> Poured			Concrete Grout
Gravel Packed:	Yes	No		
From	feet to	0 feet		

9. WATER LEVEL			
Static water level	103	feet below land surface	
Artesian flow	0	GPM	0 P.S.I.
Water Temperature	cold	Degrees F	Quality

Date started **6-28 -05**  
 Date completed **7-8 -05**

7. WELL TEST DATA			
TEST METHOD:	Bailer	Pump	<input checked="" type="checkbox"/> Air Lift
G.P.M.	Draw Down (Feet Below Static)		Time (hours)

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.  
 Name **McKay Drilling, Inc.**  
**2290 Pioneer Drive**  
**Reno, NV 89509**  
 NV Contractors No. **14170**  
 NV Driller's Lic (on site) **2121**  
 Signed   
 By driller performing actual drilling on site or contractor  
 Date **10-21 -05**