

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

OFFICE USE ONLY  
 Log No. 101610  
 Permit No. \_\_\_\_\_  
 Basin 089

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. **57825**

1. OWNER **Gary Bezotte**  
 MAILING ADDRESS **125 Pintail Way Washoe, NV 89704**  
 ADDRESS AT WELL LOCATION **125 Pintail Way Washoe**

2. LOCATION ~~NW~~ 1/4 **NE** 1/4 Sec. **5** T **16N** N/S R **20E** E **Washoe** County  
 PERMIT NO. **NV 050-435-22** 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
Gravel & sand some gray clay		125	260	135
Soft zone		260	261	1
Gravel sand gray clay		261	285	24
Soft zone	x	285	291	6
Gray sandy clay		291	300	9

Washoe County Well Permit # **WL 060179**

NAD 83  
 N39.28750  
 W 119.75581

*ORIGINAL LOG 25732*

*39.28750° N  
 119.75581° W  
 RADAR CONUS*

8. WELL CONSTRUCTION  
 Depth Drilled **300** Feet Depth Cased **300** Feet

HOLE DIAMETER (BIT SIZE)  
 From **6 1/8** Inches To **300** Feet  
 From \_\_\_\_\_ Inches To \_\_\_\_\_ Feet  
 From \_\_\_\_\_ Inches To \_\_\_\_\_ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<b>5</b>	<b>10.79</b>	<b>.188</b>	<b>120</b>	<b>300</b>

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

From **255** feet to **295** feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ 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 **115** 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 **9/21/2006**

7. WELL TEST DATA

TEST METHOD:	<input type="checkbox"/> Bailer	<input type="checkbox"/> Pump	<input checked="" type="checkbox"/> Air Lift
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)	
<b>60+</b>	<i>STATE ENGINEERS OFFICE</i>	<i>2006 SEP 26 AM 10:43</i>	
	<i>RECEIVED</i>		

Date started **9/18/2006**, 19\_\_\_\_  
 Date completed **9/21/2006**, 19\_\_\_\_