

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

OFFICE USE ONLY
 Log No. 101958
 Permit No. _____
 Basin BES

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.346

NOTICE OF INTENT NO. **59080**

1. OWNER Kent Stephens
 MAILING ADDRESS 5420 Goldenrod
Reno, NV 89511
 ADDRESS AT WELL LOCATION 5420 Goldenrod

2. LOCATION SE 1/4 NW 1/4 Sec. 2 T 17N N/S R 19E E Washoe County
 PERMIT NO. 045-531-14 Parcel No. _____ Subdivision Name _____
 Issued by Water Resources

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
On this date we abandoned the 6" x 120' domestic well. We perforated from 100' to 52'. We then pumped approximately 1.5 cu. yards of neat cement mixed 5.2 gal/sack from bottom to top using tremie pipe.				
We cut the top 2' off of the casing.				
Washoe Co. Permit #WL060131				
NAD83				
N39.36805				
W119.818900				
39.368140 N				
119.817879 W NAD27				

8. WELL CONSTRUCTION
 Depth Drilled _____ Feet Depth Cased 120 Feet

HOLE DIAMETER (BIT SIZE)
 From _____ To _____
 Inches _____ Feet _____ Feet
 Inches _____ Feet _____ Feet
 Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	12.92	.188	0	120

Perforations:
 Type perforation Mills Knife
 Size perforation Puncture
 From _____ 100 feet to _____ 50 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 120 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level 96 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature cold °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 2271
 Signed R. Bruce MacKay
 By driller performing actual drilling on-site or contractor
 Date 12/15/2006

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			

STATE ENGINEERS OFFICE
 2006 DEC 29 PM 2:19
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