

PLUGGED BY  
LOG # 64832

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

OFFICE USE ONLY  
Log No. 110115  
Permit No.  
Basin 103

PRINT OR TYPE ONLY

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. 64831

1. OWNER **Stagecoach G.I.D.** ADDRESS AT WELL LOCATION **1.5 miles E of Chavez, Hwy 50 Stagecoach, NV**  
MAILING ADDRESS **5000 Navajo Trail Stagecoach, NV 89429** *Subdivision Name:* *County: Lyon*

2. LOCATION **NE 1/4 NW 1/4 Sec 24 T17N / R22E** Latitude **N.4356000** UTM E  NAD 27  
PERMIT/WAIVER NO. **W642** **016-021-24** Longitude **E.287548** N  NAD 83/WGS 84  
*Issued by Water Resources* *Parcel No.*

3. WORK PERFORMED  
 New Well  Replace  Recondition  
 Deepen  Other **Exploratory**

4. PROPOSED USE  
 Domestic  Irrigation  Test  Monitor  Stock  Municipal/Industrial

5. WELL TYPE  
 Cable  Rotary  RVC  
 Air  Other **Mud**

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Yellowish Brn sand & Gravel		0	29	29
Brown clayish sand		29	49	20
Grey Porphyritic volcanic		49	136	87
Soft zone	x	136	140	4
Grey Porphyritic volcanic		140	261	121
Green/Grey Aphanitic Volcanic		261	394	133
Soft zone	x	394	400	6
Green/Grey Aphanitic Volcanic		400	600	200

39.329221°N  
119.464739°W  
NAD 27

9. WELL CONSTRUCTION

Depth Drilled **600** Feet Depth Cased **0** Feet

HOLE DIAMETER (BIT SIZE)

From	To
9 7/8 Inches	0 Feet to 66 Feet
6 1/8 Inches	66 Feet to 600 Feet

CASING SCHEDULE

Size O.D. (inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
n/a				

Perforations:

Type of perforation \_\_\_\_\_  
Size of perforation \_\_\_\_\_

From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Annular Seal:  Yes  No

Neat Cement \_\_\_\_\_ to \_\_\_\_\_  Pumped  Poured  
 Cement Grout \_\_\_\_\_ to \_\_\_\_\_  Pumped  Poured  
 Concrete Grout \_\_\_\_\_ to \_\_\_\_\_  Pumped  Poured  
 ≥30% Bentonite Grout \_\_\_\_\_ to \_\_\_\_\_  Pumped  Poured

Gravel Pack:  Yes  No \_\_\_\_\_ to \_\_\_\_\_  Pumped  Poured  
Type: \_\_\_\_\_  
Bentonite Chips:  Yes  No \_\_\_\_\_ to \_\_\_\_\_  Pumped  Poured  
Type: \_\_\_\_\_

Date started: **Jan 13, 20 10**  
Date completed: **Jan 27, 20 10**

7. Water Level

Static water level: **51** feet below land surface  
Artesian Flow: \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
Water Temperature: **cold** °F  
Quality: **Not Tested**

8. WELL TEST DATA

TEST METHOD:	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			
136-140	10	n/a	
394-400	15	n/a	
500-600	10	n/a	

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 **1790**

Signed *R. Bruce MacKay*  
By driller performing actual drilling on site or contractor  
Date **1-28-2010**