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

CTM-138 0

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

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

OFFICE USE ONLY
Log No. 120892
Permit No.
Basin 087

NOTICE OF INTENT NO. 71800 ~~71799~~

1. OWNER WASHOE COUNTY
MAILING ADDRESS 430 ENERGY WAY
RENO, NV

ADDRESS AT WELL LOCATION ON 20th 1 BLOCK S. OF ~~VIRG~~ VICTORIAN
Subdivision Name: County: WASHOE

2. LOCATION NE ¼ NE ¼ Sec 7 T 19 ☐S R 20 E
PERMIT/WAIVER No. Issued by Water Resources Parcel No.

Latitude 39 32 04
Longitude 119 46 14
UTM E 24884 N 4379544 ☒ NAD 27 ☐ NAD 83/WGS 84

3. WORKED PERFORMED
☒ New Well ☐ Replace ☐ Recondition
☐ Deepen ☐ Other

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

5. WELL TYPE
☐ Cable ☐ Rotary ☐ RVC
☐ Air ☒ Other SONIC

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
SEE ATATCHED LITH LOG				
NAD27				
39.534444°N				
119.770556°W				

Date started: 9-10, 20 14
Date completed: 9-11, 20 14

9. WELL CONSTRUCTION
Depth Drilled 40 Feet Depth Cased 40 Feet

HOLE DIAMETER (BIT SIZE)

		From	To
10 Inches		0 Feet	40 Feet
Inches		Feet	Feet
Inches		Feet	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
2		SCH 80 PVC		

Perforations:
Type of perforation FACTORY SLOT
Size of perforation .020
From 35 feet to 40 feet
From feet to feet
From feet to feet
From feet to feet
From feet to feet

Annular Seal: ☒ Yes ☐ No
☒ Neat Cement 0 to 16 ☒ Pumped ☐ Poured
☐ Cement Grout to ☐ Pumped ☐ Poured
☐ Concrete Grout to ☐ Pumped ☐ Poured
☐ ≥30% Bentonite Grout to ☐ Pumped ☐ Poured

Gravel Pack: ☒ Yes ☐ No 40 to 34 ☐ Pumped ☒ Poured
Type: 2x12 SILICA / #30 FINE
Bentonite Chips: ☒ Yes ☐ No 34 to 25 ☐ Pumped ☒ Poured
Type: MEDIUM

7. Water Level
Static water level: feet below land surface
Artesian Flow: G.P.M. P.S.I.
Water Temperature: °F
Quality:

8. WELL TEST DATA
TEST METHOD: ☐ Bailer ☐ Pump ☐ 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 CASCADE DRILLING (Contractor)
Address 230 E. SYDNEY, OR (Contractor)
McCARRAN, NV 89434
Nevada contractor's license number issued by the State Contractor's Board 73966
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2434
Signed K.L. Kelly
By driller performing actual drilling on-site or contractor
Date 9-11-14

USE ADDITIONAL SHEETS IF NECESSARY

(Rev. 05-06)

(NSPO 3-08)

(O) 627