

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

**OFFICE USE ONLY**  
 Log No. 120919  
 Permit No. \_\_\_\_\_  
 Basin 089

**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. 71846

1. OWNER **Carey Trust** ADDRESS AT WELL LOCATION **Same**  
 MAILING ADDRESS **7335 Franktown Rd**  
**Washoe Valley NV 89704** Subdivision Name: \_\_\_\_\_ County: **Washoe**

2. LOCATION **SE 1/4 SE 1/4 Sec 22 T 16N / R 19 E** Latitude **39.232671** UTM E  NAD 27  
 PERMIT/WAIVER NO. **DOM-14-30** **055-200-26** Longitude **-119.828878** N  NAD 83/WGS 84  
Issued by Water Resources Parcel No. \_\_\_\_\_

3. WORK 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 \_\_\_\_\_

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<b>Open Hole &amp; Fill</b>		<b>200</b>	<b>230</b>	<b>30</b>
<b>Gray Granite</b>		<b>230</b>	<b>299</b>	<b>69</b>
<b>Fracture</b>	<b>X</b>	<b>299</b>	<b>300</b>	<b>1</b>
<b>Gray Granite</b>		<b>300</b>	<b>335</b>	<b>35</b>
<b>Fractured Soft Zone</b>	<b>X</b>	<b>335</b>	<b>337</b>	<b>2</b>
<b>Gray Granite</b>		<b>337</b>	<b>381</b>	<b>44</b>
<b>Soft Zone</b>	<b>X</b>	<b>381</b>	<b>382</b>	<b>1</b>
<b>Gray Granite</b>		<b>382</b>	<b>450</b>	<b>68</b>

Washoe County Permit # **WL140036**

*NAD 27*  
*39.232672*  
*119.827860*

9. WELL CONSTRUCTION

Depth Drilled **450** Feet Depth Cased **450** Feet

HOLE DIAMETER (BIT SIZE)  
 From \_\_\_\_\_ To \_\_\_\_\_  
**6 1/8** Inches **200** Feet **450** Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ 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>175</b>	<b>450</b>

Perforations:

Type of perforation **Factory**  
 Size of perforation **.060 double row**

From **450** feet to **430** feet  
 From **330** feet to **310** 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: **8-18, 20 14**  
 Date completed: **8-20, 20 14**

7. Water Level

Static water level: **95** feet below land surface  
 Artesian Flow: \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water Temperature: \_\_\_\_\_ °F  
 Quality: **not tested**

8. WELL TEST DATA

TEST METHOD:	Draw Down (Feet Below Static)			Time (Hours)
	G.P.M.			
<b>Air</b>	<b>25+</b>			<b>2</b>

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 **9/2/14**