

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

OFFICE USE ONLY
 Log No. 122032
 Permit No. _____
 Basin 083

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. 72525

1. OWNER Mark Venson ADDRESS AT WELL LOCATION Same
 MAILING ADDRESS 4840 Livery
Reno NV 89521 Subdivision Name: _____ County: Storey

2. LOCATION SE 1/4 NW 1/4 Sec 8 T 17N / R 21 E Latitude 39.353985 UTM E _____ NAD 27
 PERMIT/WAIVER NO. _____ 003-411-06 Longitude -119.650640 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
Fill Dirt		0	3	3
Top Soil		3	4	1
Brown Sandy Clays		4	16	12
Weathered Green Volcanics		16	39	23
Gray Sandy Clays		39	169	130
Gray Volcanic Rock		169	180	11
Small Fracture	x	180	181	1
Gray Volcanic Rock		181	205	24
Small Fracture	x	205	206	1
Gray Volcanic Rock		206	281	75
Fracute	X	281	282	1
Gray Volcanic Rock		282	305	23
Fracture	X	305	306	1
Fray Volcanic Rock		306	310	4

Storey County Permit # 09450-00

NAD27
39.354073°N
119.649626°W

9. WELL CONSTRUCTION

Depth Drilled 310 Feet Depth Cased 310 Feet

HOLE DIAMETER (BIT SIZE)

From	To
<u>10 5/8</u> Inches	<u>0</u> Feet <u>55</u> Feet
<u>8 3/4</u> Inches	<u>55</u> Feet <u>310</u> Feet
_____ Inches	_____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 5/8</u>	<u>12.92</u>	<u>.188</u>	<u>0</u>	<u>310</u>
_____	_____	_____	_____	_____

Perforations:

Type of perforation Factory

Size of perforation .060 double row

From	To
<u>310</u> feet to	<u>270</u> feet
<u>230</u> feet to	<u>210</u> feet
_____ feet to	_____ feet
_____ feet to	_____ feet
_____ feet to	_____ feet

Annular Seal: Yes No

<input checked="" type="checkbox"/> Neat Cement	<u>0</u> to <u>55</u>	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
<input type="checkbox"/> Cement Grout	_____ to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> Concrete Grout	_____ to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> ≥30% Bentonite Grout	_____ to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
Gravel Pack: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<u>55</u> to <u>310</u>	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
Type: <u>1/4 x 1/8</u>			
Bentonite Chips: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____ to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
Type: _____			

7. Water Level

Static water level: 125 feet below land surface

Artesian Flow: _____ G.P.M. _____ P.S.I.

Water Temperature: 61 °F

Quality: not tested

8. WELL TEST DATA

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	<u>25+</u>		<u>2</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

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 [Signature]
 By driller performing actual drilling on site or contractor

Date 3/4/15

Replaces unknown log