

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

OFFICE USE ONLY
Log No. 123149
Permit No. _____
Basin No. 087

PRINT OR TYPE IN BLACK INK ONLY
DO NOT WRITE ON BACK

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

NOTICE OF INTENT NO. 38101
WELL NAME (if applicable): well#2

1. OWNER/CLIENT NAME Regional Transportation Commission
MAILING ADDRESS 1105 Terminal Way STE 108
Reno NV 89502

DETAILED ADDRESS AT WELL LOCATION Clean Water Way, Washoe
County, NV
Subdivision Name _____ County: _____

2. PLS LOCATION SE ¼ SE ¼ 16 Sec 10N N/S 20 E
PERMIT/WAIVER NO. DW-116 021-030-09
Issued by Water Resources Current Parcel No.

Latitude 39.508867°N UTM E _____ NAD 27
Longitude 119.715589°W UTM N _____ NAD 83/WGS 84

3. WORKED PERFORMED
 New Well Deepen: Orig Well _____
 Replacement: Original well log # _____
 Recondition: Original well log # _____

4. PROPOSED USE
 Domestic Irrigation Monitor
 Mining / Dewater Com / Ind Stock
 Test / Other Mun / QM Rec

5. WELL TYPE
 Auger Rotary RVC
 Air Mud Sonic
Other _____

6. LITHOLOGIC LOG

Material Encountered	Lost Circ.	Water Strata	From	To
Packed silt-dark silt			0	6
Dark silt-blue silty clay			6	11
blue silty clay-moist silty clay			11	17
moist silty clay			17	25
Plugged By 42 1/2" Log 125033				

7. INSTRUCTION

Depth Drilled: 25 Feet Depth Cased: 25 Feet

HOLE DIAMETER (BIT SIZE)

From	To
<u>24</u> Inches	<u>0</u> Feet <u>25</u> Feet
_____ Inches	_____ Feet _____ Feet
_____ Inches	_____ Feet _____ Feet

8. CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>8</u>	<u>6</u>	<u>SCH 40</u>	<u>0</u>	<u>25</u>

Note - Annular Material

Material	From	To
Gravel pack	0	10

9. ANNULAR MATERIALS

Sanitary Seal	Yes	No	Material	Applied
<input checked="" type="checkbox"/>			Neat Cement	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
<input type="checkbox"/>			Cement Grout	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
<input type="checkbox"/>			Concrete Grout	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
			Bentonite Chips <u>10</u>	<input type="checkbox"/> Pumped <input checked="" type="checkbox"/> Poured
<input checked="" type="checkbox"/>			Gravel Pack [> 0.2 in.] <u>12</u>	<input type="checkbox"/> Pumped <input checked="" type="checkbox"/> Poured
<input type="checkbox"/>			Sand Pack [< 0.2 in.]	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
<input type="checkbox"/>			Other, explain: _____	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured

Date started: 21-Jul . 20 15
Date completed: 21-Jul . 20 15

10. PERFORATIONS:

Type of perforation: machine slot
Size of perforation: 0.032

From	To
<u>0</u> Feet	<u>25</u> Feet
_____ Feet	_____ Feet
_____ Feet	_____ Feet
_____ Feet	_____ Feet

7. WATER QUALITIES
Static water level: 15 Feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: _____ ° Fahrenheit
Water Quality: _____

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision. This report is true to the best of my knowledge.
Name Viking Drillers, Inc
Address 5950 Granite Lake Drive, Granite Bay, CA 95746

8. WELL TEST DATA

Test Method:	G.P.M.	Draw Down (Feet Below Static)	Recorded Time (Hours)
<input type="checkbox"/> Bailor <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift			

Nevada contractor's license number as issued by the State Contractor's Board: 0034880
Nevada well driller's license number as issued by the Nevada Division of Water Resources (on-site driller): 2361
Signed: [Signature]
Date: 8/28/15

RECEIVED
SEP - 4 AM 10:59
STATE ENGINEERS OFFICE