

WELL DRILLER'S REPORT

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

OFFICE USE ONLY
Log No. 37947
Permit No. 104-EAGLE V.
Basin 104-EAGLE V.

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

Carson City Public Works
1. OWNER _____ ADDRESS AT WELL LOCATION 50' FROM SE
MAILING ADDRESS 3300 Butte Way Bennett Ave.
Carson City, Nevada 89701 Carson City, Nevada
2. LOCATION S.W. 1/4 Sec. 33 T. 15 N/S R. 20 E Carson City County
PERMIT NO. 56531 Waiver 349 (10-349) NA NA
Issued by Water Resources Parcel No. Subdivision Name

NOTICE OF INTENT NO. 13674

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Abandon 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
Sand		0	6	6
Sandy Clay		6	12	6
Clay Stringers/DG/Gravel		12	225	213
Hard Granite Bedrock		225	268	43
Abandon #45b <u>7 Bag mix 4 yds</u>				
Set 2" Tremmie Pipe		0	240	
Pump Grout (7 bag mix)				
Pull 20'		240	220	
Pumping Grout				
Pull 20'		220	200	
Pumping Grout				
Pull 20'		200	180	
Pumping Grout				
Pull 20'		180	160	
Pumping Grout				
Pull 20'		160	140	
Pumping Grout				
Pull 20'		140	120	
Pumping Grout				
Pull 20'		120	100	
Pumping Grout				
Pull 20'		100	80	
Pumping Grout				
Pull & Grout to top		80	0	

Abandoning was done in accordance to the rules and regulations of the State of Nevada. Inspector was present.

8. WELL CONSTRUCTION
Depth Drilled 268 Feet Depth Cased X Feet
HOLE DIAMETER (BIT SIZE)
From 8 1/2 Inches To 268 Feet
Inches Feet Feet
Inches Feet Feet
CASING SCHEDULE
Size O.D. (Inches) Weight/Ft. (Pounds) Wall Thickness (Inches) From (Feet) To (Feet)
NA

Perforations:
Type perforation NA
Size perforation _____
From _____ feet to _____ feet
Surface Seal: Yes No Seal Type:
Depth of Seal _____ Neat Cement
Placement Method: Pumped Cement Grout
 Poured Concrete Grout
Gravel Packed: Yes No 7 BAG MIX
From _____ feet to _____ feet

9. WATER LEVEL
Static water level DRY feet below land surface
Artesian flow _____ G.P.M. _____ P.S.I.
Water temperature _____ °F Quality _____

Date started 9/26, 1991
Date completed 9/27, 1991

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift			
		<u>NH</u>	

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name Humboldt Drilling And Pump Co. Contractor
Address P.O. BOX 590 Contractor
Winnemucca, Nevada 89446-0590
Nevada contractor's license number issued by the State Contractor's Board 015234
Nevada driller's license number issued by the Division of Water Resources the on-site driller 1533
Signed C. E. Sepler
By driller performing actual drilling on site or contractor
Date 10-11-91