

WHITE-DIVISION OF WATER RESOURCES
CANARY-CLIENT'S COPY
PINK-WELL DRILLER'S COPY

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

OFFICE USE ONLY
Log No. 44456
Permit No. 78
Basin 78
NOTICE OF INTENT NO. 24502

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

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

1. OWNER Pete Cannizzaro ADDRESS AT WELL LOCATION same
MAILING ADDRESS 5360 Goldenrod
Reno, NV 89511
2. LOCATION SE 1/4 NE 1/4 Sec. 2 T. 17N N/S R. 19 E Washoe County
PERMIT NO. 45-574-04 Issued by Water Resources Parcel No. Subdivision Name

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
Loose Multicolored				
small gravels	x	68	135	67
Sand and gravels	xx	135	150	15

During drilling process we noticed that the well didn't have a sanitary seal. We placed gravel in the open annulus and poured sand grout down the annulus to provide for a sanitary well seal.

PER TEL CON W/ DRILLER;
SEAL WAS NOT INSTALLED.
RETURNED TO WELL 2 DAYS
AFTER DRILLING (DEEPENING)
ANNULUS HAD FILLED W/
NATIVE MATERIAL.

94 JUN -6 AM 11:27
STATE ENGINEER'S OFFICE
MAT D. Howard DWR

8. WELL CONSTRUCTION
Depth Drilled 150 Feet Depth Cased 150 Feet
HOLE DIAMETER (BIT SIZE)
From To
6 1/8 Inches 68 Feet 150 Feet
.....Inches.....Feet.....Feet
.....Inches.....Feet.....Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
5	10.7	.188	30	150

Perforations:
Type perforation Factory
Size perforation 3/32 x 3
From 140 feet to 150 feet
Fromfeet tofeet
Fromfeet tofeet
Fromfeet tofeet
Fromfeet tofeet

Surface Seal: Yes No Seal Type:
Depth of Seal..... Neat Cement
Placement Method: Pumped Cement Grout
 Poured Concrete Grout
Gravel Packed: Yes No
From.....feet to.....feet

9. WATER LEVEL
Static water level 63 feet below land surface
Artesian flow.....G.P.M.....P.S.I.
Water temperature cold °F Quality unknown

Date started..... 5-12 19 94
Date completed..... 5-20 19 94

7. WELL TEST DATA

TEST METHOD: <input type="checkbox"/> Bailer <input checked="" type="checkbox"/> Pump <input type="checkbox"/> Air Lift		
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
15	79	4 hrs.

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name MacKay Pump & Geothermal, 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 1719
Signed R. Bruce Mackay
By driller performing actual drilling on site or contractor
Date 5-20-94