

OFFICE USE ONLY  
Log No. 44471  
Permit No. \_\_\_\_\_  
Basin 089

PRINT OR TYPE ONLY  
DO NOT WRITE ON BACK

WELL DRILLER'S REPORT

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

NOTICE OF INTENT NO. 24484

1. OWNER Vince & Anna Romeo ADDRESS AT WELL LOCATION 980 Brenda W.Y Carson City NV 89704  
MAILING ADDRESS 4240 Grander Ln Carson City NV 89704  
2. LOCATION NW 1/4 SE 1/4 Sec 30 T 17 S R 20 E Washoe County  
PERMIT NO. 050-253-07 Issued by Water Resources Parcel No. \_\_\_\_\_ Subdivision Name None

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
<u>Overburden</u>		<u>0</u>	<u>3</u>	<u>3</u>
<u>Small DG Sands</u>		<u>3</u>	<u>35</u>	<u>32</u>
<u>Harder DG Sands</u>		<u>35</u>	<u>69</u>	<u>34</u>
<u>Soft Clay zone</u>		<u>69</u>	<u>83</u>	<u>14</u>
<u>Sandy DG Sands</u>		<u>83</u>	<u>160</u>	<u>77</u>
<u>Broken DG Sands w/ Larger Gravels</u>	<u>XXX</u>	<u>160</u>	<u>180</u>	<u>20</u>

MAY 19 8 54 AM '94 STATE ENGINEERING

8. WELL CONSTRUCTION  
Depth Drilled \_\_\_\_\_ Feet Depth Cased \_\_\_\_\_ Feet  
HOLE DIAMETER (BIT SIZE)  
From \_\_\_\_\_ To \_\_\_\_\_  
11 1/4 Inches 0 Feet 55 Feet  
10 3/4 Inches 55 Feet 180 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>13.03</u>	<u>.188</u>	<u>0</u>	<u>180</u>

Perforations:  
Type perforation Mill slot  
Size perforation 3 x 3/32  
From 140 feet to 180 feet  
From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
Surface Seal:  Yes  No Seal Type:  Neat Cement  
Depth of Seal 55  Cement Grout  
Placement Method:  Pumped  Poured  Concrete Grout  
Gravel Packed:  Yes  No  
From 55 feet to 180 feet

9. WATER LEVEL  
Static water level 60 feet below land surface  
Artesian flow \_\_\_\_\_ G.P.M. 18-20 P.S.I.  
Water temperature Cold °F Quality Good

Date started 5-11, 1994  
Date completed 5-13, 1994

7. WELL TEST DATA

TEST METHOD: <input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift		
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>18-20</u>	<u>65</u>	<u>3 HRS</u>

10. DRILLER'S CERTIFICATION  
This well was drilled under my supervision and the report is true to the best of my knowledge.  
Name \_\_\_\_\_ Contractor  
Address \_\_\_\_\_ Contractor  
Nevada contractor's license number issued by the State Contractor's Board 31839  
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1905  
Signed Michael L. Heck  
By driller performing actual drilling on site or contractor  
Date 5-17-94