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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. **20297**

1. OWNER **Reno Sparks Convention & Visit. Auth.** ADDRESS AT WELL LOCATION **3500 Sullivan Lane Sparks**

2. LOCATION **NW 1/4 NW 1/4 Sec. 32 T. 20 S. R. 20 E. Washoe** County  
 PERMIT NO. **W-402** Issued by Water Resources Parcel No. **2701105** Subdivision Name \_\_\_\_\_

3. WORK PERFORMED  
 New Well  Replace  Recondition  Deepen  Abandon  Other **Test**

4. PROPOSED USE  
 Domestic  Irrigation  Test  Municipal/Industrial  Monitor  Stock

5. WELL TYPE  
 Cable  Rotary  RVC  Air  Other **Mod**

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Asphalt + Fill		0	2	
Clay Tan		2	7	
Clay + Sand		7	19	
Clay gray		19	31	
Rock Green F. sand		31	52	
Clay Sand		52	78	
Clay Tan		78	90	
Silty to coarse sand		90	130	
Grainy silt Stone		130	173	
Brown Volcanics		173	200	
Clay Stone		200	240	
Brown Volcanics		240	324	
Clay Stone Green Blue		324	373	
Volcanic dark Gray		373	410	
Volcanics + Clay		410	438	

8. WELL CONSTRUCTION  
 Depth Drilled **438** Feet Depth Cased \_\_\_\_\_ Feet  
 HOLE DIAMETER (BIT SIZE)  
 From \_\_\_\_\_ To \_\_\_\_\_  
**12** Inches \_\_\_\_\_ Feet **40** Feet  
**9 3/8** Inches **40** Feet **438** Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet

CASING SCHEDULE **None**

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)

Perforations:  
 Type perforation **None**  
 Size perforation \_\_\_\_\_  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  
 Neat Cement  
 Cement Grout  
 Concrete Grout  
 Placement Method:  Pumped  Poured  
 Gravel Packed:  Yes  No  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

9. WATER LEVEL  
 Static water level **25** feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature **cold** °F Quality \_\_\_\_\_

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.  
 Name **McKay Drilling** Contractor  
 Address **2270 Pioneer Drive Reno Nevada 89509** Contractor  
 Nevada contractor's license number **14170** issued by the State Contractor's Board.  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1261**  
 Signed **Steve McKay**  
 By driller performing actual drilling on site or contractor  
 Date **6/30/94**

Date started **6-17** 19**94**  
 Date completed **6-17** 19**94**

7. WELL TEST DATA

TEST METHOD:  Bailer  Pump  Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<b>200+</b>		<b>2 HR</b>