

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

OFFICE USE ONLY
 Log No. 68826
 Permit No. _____
 Basin 89

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

NOTICE OF INTENT NO. 34817

1. OWNER Darren Mack ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS 5350 Franktown Rd. 5350 Franktown Rd.
Carson City, NV 89704

2. LOCATION SW 1/4 SW 1/4 Sec. 10 T 16N N/S R 19E E Washoe County _____
 PERMIT NO. WaCo #5886 055-060-15
 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
We tagged bottom at about 290'. We deepened to 400'. We then installed 5" liner to 380' where we could not get it any further. We air developed the well. Static water level prior to deepening was 248' in 9-'96 and flow was 12 gpm. After deepening static returned to original when well was drilled. <u>DUBOIS</u> Flow went from 12 gpm to estimated 200 gpm.				
Fill	x	290	300	10
Hard granite w/ fractures	x	300	350	90
Softer granite w/ frac.	xx	350	390	40

8. WELL CONSTRUCTION
 Depth Drilled 400 Feet Depth Cased 380 Feet

HOLE DIAMETER (BIT SIZE)

	From	To
<u>6 1/8</u> Inches	<u>290</u> Feet	<u>400</u> Feet
_____ Inches	_____ Feet	_____ Feet
_____ Inches	_____ Feet	_____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>5"</u>	<u>10.79</u>	<u>.188</u>	<u>276</u>	<u>380</u>

Perforations:
 Type perforation Factory
 Size perforation 3/32" x 3" single row

From	feet to
<u>354</u>	<u>374</u>
_____	_____
_____	_____
_____	_____
_____	_____

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout

Depth of Seal _____
 Placement Method: Pumped Poured

Gravel Packed: Yes No
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level 34 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature cold °F Quality not tested

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.

Name Bruce MacKay Pump & Well Service, 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 7-8-97

Date started 6/24/97, 19____
 Date completed 6/27/97, 19____

7. WELL TEST DATA

TEST METHOD:	TEST METHOD:		Time (Hours)
	G.P.M.	Draw Down (Feet Below Static)	
<input type="checkbox"/> Bailer <input checked="" type="checkbox"/> Pump <input type="checkbox"/> Air Lift	<u>30</u>	<u>22</u>	<u>2 hr</u>
_____	_____	_____	_____
_____	_____	_____	_____

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 97 AUG 11 PM 12:36
 STATE ENGINEERS OFFICE

Deepening of log # 46337