

OFFICE USE ONLY
 Log No. 79070
 Permit No. 87
 Basin. 1

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. 42915

1. OWNER Airport Authority of Washoe Cy ADDRESS AT WELL LOCATION Airport Maintenance Facility
 MAILING ADDRESS P.O. Box 12490 Reno, NV. 89510 Air Gurd Way, Reno, NV.

2. LOCATION NE 1/4 SE 1/4 Sec. 19 T. 19 N/S R. 20 E Washoe County

PERMIT NO. 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
Monitor wells #1, 2, 3, 4, and 5 were 2" pvc, wells all constructed with 5' of blank casing on top with 20' of screen on bottom. We mixed and pumped 5 bags of Portland type II cement and approx 30 gallons of water to fill the 2" wells.				
RW-1 (recovery well) was a 6" pvc well constructed with 5' of blank and 20' of screen. This well required approx 4.5 cubic feet of neat cement.				
MW	SWL	Depth	Size	Blank Screen
1	7.56	20.5'	2"	5' 20'
2	7.59'	20.38	2"	5' 20'
3	7.61'	20.45'	2"	5' 20'
4	7.64'	20.36'	2"	5' 20'
5	7.69'	20.45'	2"	5' 20'
RW				
1	7.65'	20.5'	6"	5' 20'

See attached site map and well const. logs

8. WELL CONSTRUCTION
 Depth Drilled _____ Feet Depth Cased _____ Feet

HOLE DIAMETER (BIT SIZE)
 From _____ To _____
 Inches _____ Feet _____ Feet
 Inches _____ Feet _____ Feet
 Inches _____ Feet _____ Feet

CASING SCHEDULE

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

Perforations:
 Type perforation slotted
 Size perforation .020
 From 5' feet to 20' 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

Depth of Seal _____
 Placement Method: Pumped
 Poured
 Concrete Grout

Gravel Packed: Yes No
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level 7.56 to 7.7' feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °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 Carson Pump Contractor
 Address 1401 North Roop St. Contractor
Carson City, NV. 89701
 Nevada contractor's license number issued by the State Contractor's Board 39920
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1482
 Signed Dan Trampe
 By driller performing actual drilling on site or contractor
 Date November 11, 1999

Date started 11-9, 19.99
 Date completed 11-9, 19.99

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			