

OFFICE USE ONLY  
 Log No. 83611  
 Permit No. \_\_\_\_\_  
 Basin. 87  
 NOTICE OF INTENT NO. 0320

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

1. OWNER K.G. Watters ADDRESS AT WELL LOCATION 5500 MIA  
 MAILING ADDRESS Santa Nella CA Louis Rd Reno  
 2. LOCATION NE 1/4 NE 1/4 Sec. 4 T. 18 N. R. 20 E Washoe County  
 PERMIT NO. DEW 28 Issued by Water Resources Parcel No. 022-220-01 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 Bucket

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>Fill</u>		<u>0</u>	<u>8</u>	
<u>Fine Sand</u>		<u>8</u>	<u>12</u>	
<u>Dirty Clay w/</u>				
<u>Fine Silty Sand</u>		<u>12</u>	<u>21</u>	
<u>Dirty Silty</u>				
<u>Sand</u>		<u>21</u>	<u>23</u>	
<u>Dirty Silty Clay</u>				
<u>w/ Sand lenses</u>		<u>23</u>	<u>40</u>	

8. WELL CONSTRUCTION  
 Depth Drilled 40 Feet Depth Cased 40 Feet  
 HOLE DIAMETER (BIT SIZE)  
 From 24 Inches To 40 Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>8</u>	<u>PVC</u>	<u>Sch 40</u>	<u>0</u>	<u>40</u>

Perforations:  
 Type perforation 030  
 Size perforation 5/8"  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From 5 feet to 40 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 0 feet to 45 feet

9. WATER LEVEL  
 Static water level 10 feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature \_\_\_\_\_ °F Quality \_\_\_\_\_

Date started 6-17-01, 19\_\_\_\_\_  
 Date completed 6-17-01, 19\_\_\_\_\_

7. WELL TEST DATA

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

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge:  
 Name C.D.C. Contractor  
 Address 5365 Marland Contractor  
Ormeio CA  
 Nevada contractor's license number 31246  
 issued by the State Contractor's Board.  
 Nevada driller's license number issued by the M1968  
 Division of Water Resources, the on-site driller.  
 Signed C.D.C.  
 By driller performing actual drilling on site or contractor  
 Date 6-18-01