

m.w. 7

WHITE-DIVISION OF WATER RESOURCES
CANARY-CLIENT'S COPY
PINK-WELL DRILLER'S COPY

STATE OF NEVADA
DIVISION OF WATER RESOURCES

OFFICE USE ONLY
Log No. 88638
Permit No. _____
Basin. Q87

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. 46038

1. OWNER Kerry Lyman ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS One E First St. Suite 800 _____
Reno NV 89505 _____
119 E 4th ST _____
Reno NV 89505 _____
 2. LOCATION SW 1/4 NE 1/4 Sec. 11 T. 19 N. S. R. 19 E _____ County Washoe
 PERMIT NO. WL 03008 _____ Parcel No. 007-298-06 _____
 Issued by Water Resources _____ Subdivision Name _____

3. WORK PERFORMED New Well Replace Recondition Deepen Abandon Other _____
 4. PROPOSED USE Domestic Municipal/Industrial Irrigation Monitor Test Stock _____
 5. WELL TYPE Cable Rotary RVC Air Other Sonic

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>Gravelly clay</u> <u>Brn</u>		<u>0</u>	<u>16</u>	<u>16</u>
<u>Sandy clay</u>		<u>16</u>	<u>20</u>	<u>4</u>
<u>Clayey gravels</u> <u>Brn moist</u>		<u>20</u>	<u>32</u>	<u>12</u>
<u>Silty Gravels gray</u> <u>cobbles</u>		<u>32</u>	<u>38</u>	<u>6</u>

8. WELL CONSTRUCTION
 Depth Drilled 38 Feet Depth Cased 38 Feet
 HOLE DIAMETER (BIT SIZE)
 From 6 Inches To 0 Feet 38 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet
 CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>2</u>		<u>Sch 40</u>	<u>0</u>	<u>23</u>

 Perforations:
 Type perforation Factory
 Size perforation .020
 From 23 feet to 38 feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type: Neat Cement Cement Grout Concrete Grout
 Depth of Seal 21
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From 21 feet to 38 feet
 9. WATER LEVEL
 Static water level 37 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started 1-23, 2003
 Date completed 1-23, 2003

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			

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Boart Longyear Contractor
 Address P.O. Box 1000 Contractor
Dayton NV
 Nevada contractor's license number issued by the State Contractor's Board 0010157
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller M-2222
 Signed Bruce Anderson
 By driller performing actual drilling on site or contractor
 Date _____

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STATE ENGINEERS OFFICE