

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

OFFICE USE ONLY
 Log No. 8709
 Permit No. 085
 Basin 085
 NOTICE OF INTENT NO. **47885**

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

OWNER **Mari Willis & Troy Roberts**
 MAILING ADDRESS **7866 Tormes Ct.**
Sparks, NV 89436

ADDRESS AT WELL LOCATION **360 Santiago Ct. Sparks**

2. LOCATION **NW** 1/4 **NW** 1/4 Sec. **21** T **21N** N/S R **21E** E **washoe** County
 PERMIT NO. **076-390-34** Parcel No. Subdivision Name

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

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Brown Sand & Rock & layers Clay		1	85	84
Gray Rock		85	105	20
Brown Clay & Rock		105	165	60
Brown Clay Volcanic Rock		165	240	75
Volcanic Rock fractured	X	240	280	40
Red Clay some Rock Black & Gray fractured Rock	X	280	300	20
		300	340	40

Washoe Co. Well Permit # WL 020222

8. WELL CONSTRUCTION
 Depth Drilled **340** Feet Depth Cased **340** Feet
 HOLE DIAMETER (BIT SIZE)
 From **10 5/8** Inches To **0** Feet
 From **0** Feet To **340** Feet
 From **0** Feet To **340** Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	12.92	.188	+2	340

Perforations:
 Type perforation **Machine cut**
 Size perforation **3/32 X3**
 From **274** feet to **294** feet
 From **314** feet to **334** feet
 From feet to feet
 From feet to feet

Surface Seal: Yes No Seal Type:
 Depth of Seal **50** Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From **50** feet to **340** feet

9. WATER LEVEL
 Static water level **201** feet below land surface
 Artesian flow G.P.M. P.S.I.
 Water temperature **Cool** °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 **12/31/02**

Date started **12/18/2002**, 19
 Date completed **12/20/2002**, 19

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 checked="" type="checkbox"/> Air Lift	20+		2

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