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

mw5A-5
PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

STATE OF NEVADA
DIVISION OF WATER RESOURCES

WELL DRILLER'S REPORT

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

OFFICE USE ONLY
Log No. 90366
Permit No.
Basin 087

NOTICE OF INTENT NO. 46058

1. OWNER Washoe County Dept of Water Resources
MAILING ADDRESS 4930 Energy Way
Reno, NV 89502

ADDRESS AT WELL LOCATION Parking lot of 1100 Nugget Ave
Sparks, NV

2. LOCATION NE ¼ NW ¼ Sec. 8 T. 19 N/S R. 20 E. Washoe County

PERMIT NO. ____ Issued by Water Resources | Parcel No. 3216-606 | 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 Rotary Sonic

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Brown, Gravel, Sand	Dry	0	19	19
Gravel Sand, silt	wet	19	27	8
Sand, Silt, Clay	wet	27	53	26

RECEIVED
03 AUG 20 AM 10:57
STATE ENGINEER'S OFFICE

Date started 7-21, 20 03
Date completed 7-22, 20 03

7. WELL TEST DATA
TEST METHOD: ☐ Bailer ☐ Pump ☐ Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)

8. WELL CONSTRUCTION
Depth Drilled 53 Feet Depth Cased 53 Feet

HOLE DIAMETER (BIT SIZE)

		From	To
6 Inches		0 Feet	53 Feet
Inches		Feet	Feet
Inches		Feet	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
2"	Sch	40	0	20

Perforations:
Type perforation Factory cut
Size perforation .020
From 20 feet to 50 feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet

Surface Seal: ☒ Yes ☐ No
Depth of Seal 15
Placement Method: ☒ Pumped ☐ Poured
Seal Type: ☐ Neat Cement ☒ Cement Grout ☐ Concrete Grout

Gravel Packed: ☒ Yes ☐ No
From 18 feet to 53 feet

9. WATER LEVEL
Static water level ____ 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 BART Longyear (Contractor)
Address 32 Stokes Dr. Po Box 1000 (Contractor)
Dayton, NV 89403
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-2148T2
Signed [signature] (By driller performing actual drilling on site or contractor)
Date 8-16-03

(Rev. 12-01) USE ADDITIONAL SHEETS IF NECESSARY (O)-627