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

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. 92727
Permit No.
Basin 153

NOTICE OF INTENT NO. 54460

1. OWNER John Crowley
MAILING ADDRESS P.O. Box 1089
Dayton, NV 89403

ADDRESS AT WELL LOCATION 33 River Vista Rd.

2. LOCATION SE 1/4 SW 1/4 Sec. 26 T 16N N/S R 21E E Washoe County
PERMIT NO. ____ Issued by Water Resources | 19-622-08 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	Thickness
On this date we abandoned a 8 5/8" x 160' water well. We perforated from about 140' to approximately 60'. We then pumped approximately 3 cu. yards of neat cement mixed 5.2 gallons water/sack and tremie piped from bottom to top. We then cut off the top 2' of casing.				

RECEIVED
03 NOV 13 AM 11:00
STATE ENGINEER'S OFFICE

Date started 11/5/2003, 19__
Date completed 11/5/2003, 19__

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 160 Feet Depth Cased 160 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)
8 5/8	22.36	.250	0	160

Perforations:
Type perforation Mills Knife
Size perforation Puncture
From 140 feet to 60 feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet

Surface Seal: ☒ Yes ☐ No
Depth of Seal 160
Placement Method: ☒ Pumped ☐ Poured
Seal Type: ☒ Neat Cement ☐ Cement Grout ☐ Concrete Grout
Gravel Packed: ☐ Yes ☒ No
From ____ feet to ____ feet

9. **WATER LEVEL**
Static water level 116 feet below land surface
Artesian flow ____ G.P.M. ____ P.S.I.
Water temperature cold °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 11/5/03

USE ADDITIONAL SHEETS IF NECESSARY