

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

OFFICE USE ONLY  
 Log No. 97837  
 Permit No. \_\_\_\_\_  
 Basin Ø87

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

NOTICE OF INTENT NO. 53997

1. OWNER Bob Thomas ADDRESS AT WELL LOCATION 5040 Pleasant View Dr.  
 MAILING ADDRESS 5040 Pleasant View Dr. Sparks  
Sparks, NV 89432

2. LOCATION NW 1/4 NW 1/4 Sec. 01 T 19N N/S R 20E E Washoe County  
 PERMIT NO. 30-203-08 Parcel No. \_\_\_\_\_ Subdivision Name \_\_\_\_\_  
 Issued by Water Resources \_\_\_\_\_

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
Brown volcanic rock		277	280	3
Fracture	x	280	281	1
Brown to black volcanic rock		281	290	9
Fracture	x	290	291	1
Brown black volcanic rock		291	305	14
Fracture	x	305	310	5
Brown volcanic rock		310	340	30
Fracture	x	340	342	2
Brown volcanic rock		342	383	41
Gray volcanic rock		383	415	32
Fracture	x	415	421	6
Gray volcanic rock		421	450	29

Washoe County Well Permit # WL 050181

8. WELL CONSTRUCTION  
 Depth Drilled 450 Feet Depth Cased 450 Feet

HOLE DIAMETER (BIT SIZE)  
 From 6 1/8 Inches To 450 Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>5</u>	<u>10.79</u>	<u>.188</u>	<u>263</u>	<u>450</u>

Perforations:  
 Type perforation Machine cut  
 Size perforation 3/32 x 3

From _____	<u>303</u>	feet to	<u>323</u>	feet
From _____	<u>343</u>	feet to	<u>363</u>	feet
From _____	<u>383</u>	feet to	<u>403</u>	feet
From _____	<u>423</u>	feet to	<u>443</u>	feet
From _____		feet to		feet

Surface Seal:  Yes  No Seal Type:  
 Depth of Seal \_\_\_\_\_  Neat Cement  
 Placement Method:  Pumped  Cement Grout  
 Poured  Concrete Grout

Gravel Packed:  Yes  No  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

9. WATER LEVEL  
 Static water level 235 feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature Cool °F Quality Not tested

Date started 9/12/2005, 19\_\_\_\_  
 Date completed 9/14/2005, 19\_\_\_\_

7. WELL TEST DATA

TEST METHOD:	Draw Down (Feet Below Static)		Time (Hours)
	G.P.M.		
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	<u>30+</u>		<u>3</u>

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 923  
 Signed R. Bruce MacKay  
 By driller performing actual drilling on-site or contractor  
 Date 9/15/2005