

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

OFFICE USE ONLY
 Log No. 101659
 Permit No. _____
 Basin 092B

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. **57795**

1. OWNER **Patrick Davis** ADDRESS AT WELL LOCATION **7850 Leather Ln.**
 MAILING ADDRESS **7915 Silver Lake Rd.**
Reno, NV 89506

2. LOCATION **NE** 1/4 **SW** 1/4 Sec. **4** T **20N** N/S R **19E** E **Washoe** County
 PERMIT NO. **086-402-08** 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
Top soil		0	2	2
D.G.		2	18	16
Gray hard granite		18	35	17
Weatherd granite		35	37	2
Green hard granite		37	116	79
Fracture		116	117	1
Weatherd hard granite		117	131	14
Fracture		131	132	1
Weatherd hard granite		132	197	65
Soft weatherd granite		197	215	18
Weatherd hard granite		215	260	45
Soft weatherd granite		260	270	10
Weatherd hard granite		270	315	45
Fracture	x	315	317	2
Weatherd hard granite		317	377	60
Fracture	x	377	379	2
Weatherd		379	398	19
Fracture	x	398	401	3
Weatherd granite		401	410	9

Washoe County Permit # **WL 060121**
NAD 83
N 39.62603
W 119.85727

8. WELL CONSTRUCTION
 Depth Drilled **410** Feet Depth Cased **410** Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet
10 5/8	0	50	Feet
8 5/8	50	410	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	12.92	.188	+2	410

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

From	To	Feet
305	325	feet
345	365	feet
385	405	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 **410** feet

9. WATER LEVEL
 Static water level **198** 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 **923**

Signed R. Bruce MacKay
 By driller performing actual drilling on-site or contractor
 Date **8/24/2006**

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
100+		3