

OFFICE USE ONLY
 Log No. 37889
 Permit No. _____
 Basin 87

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

WELL DRILLER'S REPORT

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

NOTICE OF INTENT NO. 20133

1. OWNER Client Geraghty & Miller, Inc. ADDRESS AT WELL LOCATION Chevron Sparks Terminal
 MAILING ADDRESS 5270 Neil Road, Suite 101, 275 Nugget Avenue,
Reno, NV 89502 Sparks, NV 89431
 2. LOCATION NW 1/4 NW 1/4 Sec 9 T. 19 N. N/S R. 20 E. Washoe County
 PERMIT NO. M/O - 452 / SB-2 Sparks Terminal NVO7002
Issued by Water Resources 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 Tubex

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Asphalt		0	1	1
Olive gray sandy gravel (GW) dry, loose. Gravel is rounded, cobbles common.		1	3	2
Olive gray silty sand (SM) dry loose. Minor gravel to 2 inches in diameter. Minor small roots.		3	9	6
Olive gray sandy gravel (GW) dry loose. Gravel is rounded, cobbles common. Soll is moist below 16 feet. Soll is very moist below 20 ft. Color grades to dark yellowish brown.	X	9	26,3	17,3

8. WELL CONSTRUCTION
 Depth Drilled 26.3 Feet Depth Cased _____ 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)

 Perforations:
 Type perforation _____
 Size perforation _____
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type: _____
 Depth of Seal _____
 Neat Cement
 Cement Grout
 Placement Method: Pumped Concrete Grout
 Poured
 Gravel Packed: Yes No
 From _____ feet to _____ feet

SOIL BORING ABANDONMENT: 10-10-91
 Abandone with neat cement from bottom to top.
 (11 sacks Portland II + 2 sacks Concrete Mix)

9. WATER LEVEL
 Static water level _____ feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

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

Date started 10-10-91, 19____
 Date completed 10-10-91, 19____

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Wayne Drilling, Inc.
 Address P.O. Box 12370, Reno, NV 89510
 Nevada contractor's license number issued by the State Contractor's Board 22549
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 908
 Signed [Signature]
 Date 3-23-92