



OFFICE USE ONLY
 Log No. 38045
 Permit No. _____
 Basin 104

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. 19495

1. OWNER ALVIN KRAMER ADDRESS AT WELL LOCATION 4644 Old Clear Creek Rd
 MAILING ADDRESS 2350 Merritt Dr Carson City NV 89701

2. LOCATION N/E 1/4 SW 1/4 Sec. 35 T 15 N/S R 19 E Carson County
 PERMIT NO. 91-3 Issued by Water Resources Parcel No. Parcel M11158's Subdivision Name N/A Parcel D-4

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
<u>Over Burden</u>		<u>0</u>	<u>7'</u>	<u>7</u>
<u>Decomposed Gravel</u>		<u>7'</u>	<u>110</u>	<u>103</u>
<u>Clay</u>		<u>110'</u>	<u>120'</u>	<u>10'</u>
<u>D-C AND CLAY</u>		<u>120'</u>	<u>147'</u>	<u>27'</u>
<u>Decomposed Gravel</u>		<u>147'</u>	<u>170'</u>	<u>23'</u>
<u>Broken Rock</u>		<u>170'</u>	<u>200'</u>	<u>30'</u>

'91 OCT 30 PMZ:02
 STATE ENGINEERS ASSOCIATION

8. WELL CONSTRUCTION

Depth Drilled 200' Feet Depth Cased 200' Feet

HOLE DIAMETER (BIT SIZE)

From		To	
<u>10</u> Inches	<u>0'</u> Feet	<u>200'</u> Feet	
_____	_____	_____	_____
_____	_____	_____	_____

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 5/8</u>	<u>14</u>	<u>1 3/8</u>	<u>0</u>	<u>200'</u>
_____	_____	_____	_____	_____

Perforations:
 Type perforation Mill Slot
 Size perforation 3 X 3/32
 From 100' feet to 200' feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 100' Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout

Gravel Packed: Yes No
 From 100' feet to 200' feet

9. WATER LEVEL
 Static water level 45 feet below land surface
 Artesian flow N/A G.P.M. 200 P.S.I.
 Water temperature 60.1 °F Quality N/A

Date started 10-10, 1991
 Date completed 10-17, 1991

7. WELL TEST DATA

TEST METHOD: Bailor Pump Air Lift

	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>Blow/Air</u>	<u>20+</u>		<u>5 HR'S</u>
_____	_____	_____	_____

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name EMDICO Drilling Co. Contractor
 Address 1443 Hwy 395 South Contractor
Gardnerville NV 89410
 Nevada contractor's license number 24149
 issued by the State Contractor's Board.
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1544
 Signed Manuel T. Haas
 By driller performing actual drilling on site or contractor
 Date 10-18-91