

OFFICE USE ONLY
 Log No. 38145
 Permit No. _____
 Basin 83
 NOTICE OF INTENT NO. 18282

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

1. OWNER Lou Tassone ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS 2200 Schooner 240 Lousetown
Reno, Nv 89509 Lot 18 Block G

2. LOCATION SW 1/4 SW 1/4 Sec 33 T. 18 N/S R. 21 E Storey County _____
 PERMIT NO. 3-045-40 - Virginia City Highlands
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 _____

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Overburden		0	3	3
Tan clay mixed with sands & gravels some yellow clay		3	35	32
Blue grey clay mixed w/ coarse sands & gravels		35	87	52
Hard black & blue green & white rock	X	87	100	13
Back to grey clay black & grey sands some green gravels yellow rock & clay		100	120	20
Black volcanic rock and little gray clay		120	130	10
Green volcanic rock		130	141	11
Purple & some green volcanic rock		141	160	19
Green purple rock sands & gravels		160	170	10
Green volcanic rock sands & gravels		170	179	9
T.D. 179 ft				

8. WELL CONSTRUCTION
 Depth Drilled 179 Feet Depth Cased 179 Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet	Feet
10 5/8	0	55		
8 1/2	57	179		

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	12.92	.188	+ 1	179

Perforations:
 Type perforation factory
 Size perforation 3/32" X 3"

From	feet to	feet	feet
<u>139</u>	<u>159</u>		

Surface Seal: Yes No Seal Type: _____
 Depth of Seal 50
 Neat Cement
 Placement Method: Pumped Concrete Grout
 Poured

Gravel Packed: Yes No
 From 50 feet to 179 feet

9. WATER LEVEL
 Static water level 70 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature cool °F Quality _____

Date started 3/17/92, 19____
 Date completed 3/18/92, 19____

7. WELL TEST DATA

TEST METHOD: Bailor Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>20+</u>		<u>1</u>

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.

Name Aqua Drilling & Well Service, Inc
 Contractor
 Address 625 Spice Islands Dr Suite L
Sparks, Nv 89431
 Contractor

Nevada contractor's license number 15291
 issued by the State Contractor's Board

Nevada driller's license number issued by the 1804
 Division of Water Resources, the on-site driller.

Signed Roger M Thrall
 By driller performing actual drilling on site or contractor
 Date Roger M. Thrall 3/20/92