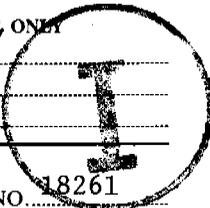


OFFICE USE ONLY
 Log No. 38658
 Permit No. _____
 Basin 87


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. 18261

1. OWNER Don Woelfe ADDRESS AT WELL LOCATION 2325 Derbish
 MAILING ADDRESS 455 Crampton
Reno, Nv 89502
 2. LOCATION SW 1/4 SE 1/4 Sec. 21 T 19 N/S R 20 E Washoe County
 PERMIT NO. 21-131-41 Hidden Valley
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 Mud

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
OVERBURDEN		0	7	7
Black silt & clay		7	17	10
Multicolored gravels & sands		17	36	19
Light brown clay		36	39	3
Brown clay & sands multicolored mostly black & white		39	55	16
Cobbles & boulders multicolored sand little brown clay		55	68	13
Out of cobbles & boulders coarse gravels & sands brown clay		68	83	15
Gray clay & multi-colored coarse & fine sands		83	110	27
Black & white sand & large coarse gravel red brown yellow white		110	131	21
Gray clay & sands T.D. 141 ft		131	141	10

8. WELL CONSTRUCTION
 Depth Drilled 141 Feet Depth Cased 135 Feet
 HOLE DIAMETER (BIT SIZE)
 From 11 Inches To 0 Feet 135 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	12.92	.188	+ 1	135

Perforations:
 Type perforation screen - 10 ft
 Size perforation .030
 From 115 feet to 125 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type: Neat Cement
 Depth of Seal 100 Cement Grout
 Placement Method: Pumped Concrete Grout
 Poured
 Gravel Packed: Yes No
 From 100 feet to 135 feet

9. WATER LEVEL
 Static water level 4 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature cold °F Quality _____

Date started 1/20/92 19_____
 Date completed 1/22/92 19_____
 7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
20+		3

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
 Address 625 Spice Islands Dr Suite L
Sparks, Nv 89431
 Nevada contractor's license number issued by the State Contractor's Board 15291
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1804
 Signed Roger M Thrall
 By driller performing actual drilling on site or contractor
 Date Roger M. Thrall 1/23/92