

OFFICE USE ONLY
 Log No. 41745
 Permit No. _____
 Basin 84

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

16 CRA 1

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. 23023

1. OWNER Tony & Betsy Rider ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS 605 Ironwood 605 Ironwood
Reno, Nv 16-2-1-8
 2. LOCATION NW 1/4 SW 1/4 Sec. 16 T. 22 N/S R. 21 E. Washoe County
 PERMIT NO. R-189 077-130-28 Palomino 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 _____

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Set-up over hole				
pull casing 8 inch				
Fill hole with neat cement as casing was being pulled				
Got 85 feet of 8 inch casing out of hole				
Casing had fingers for overshot at bottom of 85 foot string				
We observed casing had been dropped from Jim House Drilling or a broken weld and they tried to overshoot bottom casing				

8. WELL CONSTRUCTION
 Depth Drilled _____ 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
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From _____ feet to _____ feet

'93 MAY 25 10:55 AM
 STATE ENGINEERS

*See log # 240575
 Abandonment of log # 16895 + 17775*

Date started 5/6/93, 19____
 Date completed 5/6/93, 19____

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

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

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

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 5/12/93