

OFFICE USE ONLY
 Log No. 42743
 Permit No. 6-91
 Basin 6-91

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. 23365

1. OWNER VIKING METALLURGICAL ADDRESS AT WELL LOCATION 1 Eric Circle
 MAILING ADDRESS P.O. Box 339 Verdi, NV 89439
 2. LOCATION SW 1/4 SE 1/4 Sec. 8 T. 19N N/S R. 18 E. Washoe County
 PERMIT NO. M/O 704 MW#1 Parcel No. _____ Subdivision Name _____
 Issued by Water Resources _____

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	Thick-ness
Fill decomposed granite		0	2 1/2	2 1/2
Fill rock & gravel		2 1/2	3 1/2	1
Rock & boulder		3 1/2	5	1 1/2
Sandy clay, dark gray some woo-organic material - moist		5	8	3
Silty clay, brown dark gray/moist		8	14	6
Rock boulder		14	15	1
Rock gravel & sand gravel rounded		15	18	3
Dark gray rock with some clay		18	19	1
Blue gray volcanic rock		19	24 1/2	5 1/2

NOTE: Existing MW#1 6 feet deep was cased with 12 inch culvert pipe. Casing was removed with backhoe. 2 feet of neat cement was placed in bottom of existing hole. Excavation was backfilled with native material. 3 sacks of Portland Cement Type II was used. Abandon well is 6 feet N of replacement well.

8. WELL CONSTRUCTION
 Depth Drilled 24 1/2 Feet Depth Cased 24 1/2 Feet

HOLE DIAMETER (BIT SIZE)
 From To
9 1/16 Inches 0 Feet 24 1/2 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
2 SS (stainless steel)		sch 5	0	24 1/2

End cap & locking cap installed

Perforations: factory sawed slot
 Type perforation _____
 Size perforation 020
 From 4 1/2 feet to 24 1/2 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 0 to 3 feet Neat Cement
 Cement Grout
 Concrete Grout
 Placement Method: Pumped Poured
 Bentonite seal at 3 to 3 1/2 feet
 Gravel Packed: Yes No
 From 3 1/2 feet to 24 1/2 feet

Date started 8-26-93 19____
 Date completed 8-27-93 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 6.8 feet below land surface
 Artesian flow not known G.P.M. _____ P.S.I. _____
 Water temperature not known Quality not known

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. Contractor
 Address P.O. Box 12370 Contractor
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 Wayne Drilling, Inc.
 By driller performing actual drilling on site or contractor
 Date September 16, 1993