

STATE OF NEVADA
 DIVISION OF WATER RESOURCES
WELL DRILLER'S REPORT

OFFICE USE ONLY
 Log No. **44802**
 Permit No. _____
 Basin. **044**

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. **22885**

1. OWNER **DAVE EVANS** ADDRESS AT WELL LOCATION **Corner of S 24 St**
 MAILING ADDRESS **P.O. Box 5263 Reno NV 89503**

2. LOCATION **SE 1/4 Sec. 36 T. 36 N/S R. 56 E. 1/2** County _____
 PERMIT NO. **64-1** Issued by Water Resources Parcel No. _____ Subdivision Name **Ryndon**

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
SANDY LOAM		0	5	5
SANDSTONE		5	15	10
CLAY		15	165	150
SANDSTONE		165	172	7
CLAY		172	174	2
SANDSTONE		174	196	22
CLAY		196	212	16
Loose sandstone	X	212	230	18

8. WELL CONSTRUCTION
 Depth Drilled **230** Feet Depth Cased **230** Feet

HOLE DIAMETER (BIT SIZE)
 From To
10 Inches **0** Feet **50** Feet
5 1/2 Inches **00** Feet **230** Feet
 Inches Feet Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 3/4	12.92	1.88	00	230

Perforations:
 Type perforation **slots**
 Size perforation **3/16 x 3/4"**
 From **210** feet to **230** feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout

Depth of Seal **57**

Placement Method: Pumped Poured

Gravel Packed: Yes No
 From **57** feet to **230** feet

9. WATER LEVEL
 Static water level **121** feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature **Cold** °F Quality **Good**

Date started **5-18** 19**94**
 Date completed **5-23** 19**94**

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	40		6

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name **Feetig Drilling Co** Contractor
 Address **P.O. Box 525 Reno NV 89503** Contractor
 Nevada contractor's license number issued by the State Contractor's Board **31804**
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1584**
 Signed **Shane C. Feetig**
 By driller performing actual drilling on site or contractor
 Date **6-3-94**

JUN 13 P 1:47
 STATE ENGINEERS OFFICE