

47911
 OFFICE USE ONLY
 Log No. _____
 Permit No. _____
 Basin _____
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 NOTICE OF INTENT NO. 27924

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 Mike + Barbara Haley ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS _____ 345 Sparrow Way Washoe City
Carson City Nev
 2. LOCATION NW 1/4 SE 1/4 Sec. 32 T. 17 N/S R. 20 E Washoe County
 PERMIT NO. _____ Issued by Water Resources _____ Parcel No. 50-372-09 Subdivision Name _____

3. WORK PERFORMED New Well Replace Recondition Deepen Abandon Other _____
 4. PROPOSED USE Domestic Municipal/Industrial Irrigation Monitor Test Stock Cable Rotary RVC Air Other _____

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
<u>Soft to Med Yellow Granite</u>		<u>0</u>	<u>260</u>	<u>260</u>
<u>Hard Granite</u>		<u>260</u>	<u>340</u>	<u>80</u>
<u>Fractured</u>	<u>270</u>			
	<u>300</u>			
	<u>335</u>			

8. WELL CONSTRUCTION
 Depth Drilled 340 Feet Depth Cased 340 Feet
 HOLE DIAMETER (BIT SIZE)
 From _____ To _____
9 7/8 Inches 0 Feet 50 Feet
8 3/4 Inches 50 Feet 340 Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 5/8</u>	<u>13</u>	<u>.188</u>	<u>+1</u>	<u>340</u>

Perforations:
 Type perforation Factory Milled
 Size perforation 3/32
 From _____ feet to _____ feet
 From 300 feet to 340 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type: Neat Cement Cement Grout Concrete Grout
 Depth of Seal 50
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From 50 feet to 340 feet

9. WATER LEVEL
 Static water level 265 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature Cold °F Quality Clear

Date started Jan 16 1995
 Date completed Jan 23 1995

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	<u>25</u>		<u>2</u>

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Enloe Drilling Contractor
 Address P.O. Box 1345 Contractor
Dayton, Nev.
 Nevada contractor's license number issued by the State Contractor's Board 4739A
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1480
 Signed Lee A. Enloe
 By driller performing actual drilling on site or contractor
 Date Jan 23 1995