

OFFICE USE ONLY
 Log No. 49376
 Permit No. _____
 Basin. 085

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. 29550

1. OWNER Mike Barnett ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS 525 Mogul Mtn Drive 425 Descanso Lane
Reno, Nevada 89523 Sparks, Nevada 89436
 2. LOCATION SE 1/4 SW 1/4 Sec. 1 T. 21N N/S R. 20E E Washoe County
 PERMIT NO. 076-290-17 Spanish Springs
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	Thickness
Top Soil		0	1	1
Light green clay		1	6	5
Brown clay some gravel & boulder		6	22	16
Rusty clay		22	27	5
Volcanic brown rock		27	38	11
Rusty brown Volcanic Soft zone (no Water)	X	38	69	31
Rusty brown volcanic rock.		69	70	1
Green volcanic rock		70	140	70
Brown volcanic rock		140	165	25
Green volcanic rock		165	190	25
Hard volcanic rock		190	221	31
Fracture	X	221	311	90
Hard gray volcanic rock		311	316	5
Fracture rock	X	316	331	15
Hard gray volcanic rock		331	369	38
Fracture	X	369	385	16
Gray hard volcanic rock		385	395	10
		395	400	5

8. WELL CONSTRUCTION
 Depth Drilled 400 Feet Depth Cased 400 Feet
 HOLE DIAMETER (BIT SIZE)
 From To
10 Inches 0 Feet 50 Feet
8 5/8 Inches 50 Feet 400 Feet
 _____ Inches _____ Feet _____ Feet
 CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8		.188	0	400

 Perforations:
 Type perforation Factory Sawn Slot
 Size perforation 3/32 x 5 x around
 From 335 feet to 395 feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type:
 Depth of Seal 50 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 50 feet to 400 feet

Date started 6/1/95, 19_____
 Date completed 6/5/95, 19_____

7. WELL TEST DATA

TEST METHOD: <input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift			
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)	
21			

9. WATER LEVEL
 Static water level 301 feet below land surface
 Artesian flow _____ G.P.M. 21 P.S.I.
 Water temperature cold °F Quality clear
 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, Nevada 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 923
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date June 8, 1995