

OFFICE USE ONLY  
 Log No. 50048  
 Permit No. \_\_\_\_\_  
 Basin. ORF  
 NOTICE OF INTENT NO. 31886

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 Edward & Pamela Lodge ADDRESS AT WELL LOCATION \_\_\_\_\_  
 MAILING ADDRESS P.O. Box 50533 550 Calle Bonito Court  
Sparks, Nevada 89435 Sparks, Nevada 89436  
 2. LOCATION NW 1/4 NE 1/4 Sec. 19 T. 21N N/S R. 21 East Washoe County  
 PERMIT NO. 1076-571-30 37K-04 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  Air  Other \_\_\_\_\_

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Tan, Brown, White And Black DG		0	58	58
Black & White Fractured Granite	xx	58	520	462
TD 520 ft.				

8. WELL CONSTRUCTION  
 Depth Drilled 520 Feet Depth Cased 520 Feet  
 HOLE DIAMETER (BIT SIZE)  
 From To  
10-5/8 Inches 0 Feet 53 Feet  
8-1/2 Inches 53 Feet 520 Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6-5/8	12.92	.188	+1-1/2	520

Perforations:  
 Type perforation Factory-sawed  
 Size perforation 3/32 x 3  
 From 500 feet to 480 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  
 Depth of Seal 53  Neat Cement  
 Placement Method:  Pumped  Cement Grout  
 Poured  Concrete Grout  
 Gravel Packed:  Yes  No  
 From 520 feet to 53 feet

9. WATER LEVEL  
 Static water level 380 feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature cool °F Quality \_\_\_\_\_

Date started Oct. 2, 1995, 19\_\_\_\_  
 Date completed Oct. 4, 1995, 19\_\_\_\_

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>15+</u>		<u>3 hours</u>

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.  
 Name A.S.A.P. Pump & Well Service, Inc. Contractor  
 Address 1800-1/2 Frazer Avenue Contractor  
Sparks, Nevada 89431  
 Nevada contractor's license number issued by the State Contractor's Board 35387-A  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1511  
 Signed [Signature]  
 By driller performing actual drilling on site or contractor  
 Date Oct. 5, 1995