

OFFICE USE ONLY
 Log No. 51184
 Permit No. _____
 Basin 089

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. 28125

1. OWNER Steve Young Enterprises ADDRESS AT WELL LOCATION 1905 Lakeshore Dr. Carson City NV. 89706
 MAILING ADDRESS Box 71449 Reno NV. 89570
 2. LOCATION NW 1/4 NW 1/4 Sec. 30 T. 17 S. R. 20 E Washoe County
 PERMIT NO. _____ Issued by Water Resources Parcel No. 650-060-34 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 Mud

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>Overburden</u>		<u>0</u>	<u>2</u>	<u>2</u>
<u>Rusty Sands</u>		<u>2</u>	<u>12</u>	<u>10</u>
<u>Gray Silty Sands</u>		<u>12</u>	<u>63</u>	<u>51</u>
<u>Gray Gummy Clay with Silty Sands</u>		<u>63</u>	<u>105</u>	<u>42</u>
<u>Hard Broken DG Sands Green & White</u>	<u>xxx</u>	<u>105</u>	<u>140</u>	<u>35</u>
<u>Gray Clay</u>		<u>140</u>	<u>145</u>	<u>5</u>

8. WELL CONSTRUCTION
 Depth Drilled 145 Feet Depth Cased 145 Feet
 HOLE DIAMETER (BIT SIZE)
 From 1 1/4 Inches To 0 Feet 145 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 3/8</u>	<u>13.03</u>	<u>1.88</u>	<u>0</u>	<u>145</u>

Perforations:
 Type perforation M-11 Slot
 Size perforation 3 x 3/32
 From 125 feet to 145 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout
 Depth of Seal 100'
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From 100' feet to 145 feet

9. WATER LEVEL
 Static water level 20 feet below land surface
 Artesian flow _____ G.P.M. dot P.S.I.
 Water temperature Cold °F Quality Good

Date started 11-11, 1995
 Date completed 11-13, 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>dot</u>	<u>45</u>	<u>3 HRS</u>

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Ad H Pump Company Contractor
 Address 5551 Hwy 50 E #3 Carson City NV. 89701 Contractor
 Nevada contractor's license number 31839 issued by the State Contractor's Board.
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1905
 Signed Michael L. Hoek
 By driller performing actual drilling on site or contractor
 Date 11-18-95