

OFFICE USE ONLY  
 Log No. 31447  
 Permit No. 1087  
 Basin 1087

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. 30594

Consultant: WOODWARD-CLYDE Client: INTERSTATE BRANDS CORP.  
 1. OWNER: WOODWARD-CLYDE ADDRESS AT WELL LOCATION: 1825 Glendale Ave. (formerly Continental Baking Company)  
 MAILING ADDRESS: 10370 Old Placerville Rd. Ste 104 Sparks, NV  
 Sacramento, CA 95827  
 2. LOCATION: SW 1/4 NW 1/4 Sec 8 T. 19N N/S R. 20 E. Washeo County  
 PERMIT NO. R-283 VES-1 034-031-10 (@1817 Glendale Ave. (CBC) Sparks)  
 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
3-13-96 VES-1 1 inch well				
Static water level @0				
Total depth @19.1 feet				
Equipment used:				
Service truck, 2 man crew				
Walnut Grove High Pressure cement pump				
No tremie pipe used				
Materials used:				
1 sack of Portland Cement Type II				
1. Measure static water level				
2. Glue threaded adapter to existing casing				
3. No tremie				
4. Pump neat cement to fill casing				
5. Pump cement @100 to 125 PSI squeezing cement through perforations into the surrounding formation. When pressure increases, discontinue pumping.				
6. Remove traffic cover, cut casing below grade and patch with asphalt.				
Location:				
Approx. 3 feet E of concrete slab S of Building.				

8. WELL CONSTRUCTION

Depth Drilled.....Feet Depth Cased.....Feet

HOLE DIAMETER (BIT SIZE)

From To

.....Inches.....Feet.....Feet

.....Inches.....Feet.....Feet

.....Inches.....Feet.....Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)

Perforations:

Type perforation.....

Size perforation.....

From.....feet to.....feet

From.....feet to.....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.....

Placement Method:  Pumped  
 Poured

Gravel Packed:  Yes  No  
 From.....feet to.....feet

9. WATER LEVEL

Static water level.....feet below land surface

Artesian flow.....G.P.M. P.S.I.

Water temperature.....°F Quality.....

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 908  
 Signed [Signature]  
 By driller performing actual drilling on site or contractor  
 Date March 18, 1996

Date started 3-13-96, 19.....  
 Date completed 3-13-96, 19.....

7. WELL TEST DATA

TEST METHOD:  Bailer  Pump  Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)