

OFFICE USE ONLY
 Log No. 5448
 Permit No. _____
 Basin. 087

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

1. Consultant: WOODWARD-CLYDE Client: INTERSTATE BRANDS CORP.
 OWNER MAILING ADDRESS 10370 Old Placerville Rd, Ste 104 ADDRESS AT WELL LOCATION 1825 Glendale Ave. (formerly Continental Baking
Sacramento, CA 95827 Sparks, Nevada Company)

2. LOCATION SW $\frac{1}{4}$ NW $\frac{1}{4}$ Sec. 8 T. 19N N/S R. 20 E Washoe County
 PERMIT NO. R-283 MW-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 MW-1 4 inch well				
Static Water level @20.7 feet				
Total depth 31.4 feet				
Equipment used:				
Service truck, 2 man crew				
Walnut Grove High Pressure cement pump				
30 feet X 1 1/2" dia tremie pipe				
Materials used:				
5 sacks of Portland Cement Type II				
1. Measure static water level				
2. Glue threaded adapter to existing casing				
3. Set tremie pipe to bottom of casing				
4. Pump neat cement from bottom to surface				
5. Pull tremie, fill casing & attach from cement pump directly to casing				
6. Pump cement @100-125 PSI squeezing cement through perforations into surrounding formation				
7. Remove traffic cover, cut casing below grade and patch with asphalt.				
Location:				
Approx. 3 feet E of concrete slab S of building.				
NOTE: Please add to #6. When pressure increases discontinue pumping.				

8. WELL CONSTRUCTION

Depth Drilled _____ Feet Depth Cased _____ Feet

HOLE DIAMETER (BIT SIZE)

From	To
_____ Inches	_____ Feet
_____ Inches	_____ Feet
_____ Inches	_____ Feet

CASING SCHEDULE

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

Perforations:

Type perforation _____
 Size perforation _____

From	To
_____ 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

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

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

Date started 3-13-96 19____
 Date completed 3-13-96 19____