

OFFICE USE ONLY
 Log No. 63891
 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. 32529

1. OWNER STEVE HOPE ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS 1780 East Lake Blvd. 1615 Guffey Drive
Carson City, Nevada 89704 Carson City, Nevada 89704
 2. LOCATION SE 1/4 SW 1/4 Sec 30 T 17N N/S R 20 E Washoe County
 PERMIT NO. 050-296-01 New Washoe City
 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	Thick-ness
Top soil		0	3	3
Brown to rusty fine sand		3	19	16
Brown sandy clay		19	30	11
Soft zone (NO WATER)		30	31	1
Brown sandy clay with gravels		31	55	24
Brown sandy clay		55	89	34
Soft zone	X	89	101	12
Brown clay		101	105	4
Weathered granite		105	129	24
Soft zone	X	129	135	6
Weathered granite		135	150	15

8. WELL CONSTRUCTION
 Depth Drilled 150 Feet Depth Cased 150 Feet
 HOLE DIAMETER (BIT SIZE)
 From To
10 Inches 0 Feet 50 Feet
8 5/8 Inches 50 Feet 150 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	150

Perforations:
 Type perforation factory sawed slot
 Size perforation 3/32 x 3 x 5 around
 From 85 feet to 105 feet
 From 125 feet to 145 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 50 feet Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 50 feet to 150 feet

9. WATER LEVEL
 Static water level 35 feet below land surface
 Artesian flow _____ G.P.M. 20 P.S.I.
 Water temperature cold °F Quality clear

Date started 2-5-96, 19_____
 Date completed 2-6-96, 19_____

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
20		

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 Wayne C. Helman
 By driller performing actual drilling on site or contractor
 Date February 6, 1996