

OFFICE USE ONLY
 Log No. 64857
 Permit No. _____
 Basin 1125

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. 33612
3498 Alpineview Ct
Gardnerville NV 89423

1. OWNER Laurie Chato ADDRESS AT WELL LOCATION 3498 Alpineview Ct Gardnerville NV 89423
 MAILING ADDRESS 3498 Alpineview Ct Gardnerville NV 89423
 2. LOCATION NW 1/4 NW 1/4 Sec. 11 T. 14 S. R. 19 E. Douglas County
 PERMIT NO. 15-080-34 Parcel No. _____
 Issued by Water Resources _____ Subdivision Name Jacks Valley

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
<u>Soft DG Sands</u>		<u>0</u>	<u>35</u>	<u>35</u>
<u>Course DG Sands</u>		<u>35</u>	<u>110</u>	<u>75</u>
<u>Medium DG Sands w/ Grayish Color</u>	<u>X</u>	<u>110</u>	<u>175</u>	<u>65</u>
<u>Course Rusty DG Sands</u>	<u>XXX</u>	<u>175</u>	<u>200</u>	<u>25</u>
<u>TD 200'</u>				

8. WELL CONSTRUCTION
 Depth Drilled 200 Feet Depth Cased 200 Feet
 HOLE DIAMETER (BIT SIZE)
 From 10 3/4 Inches To 0 Feet
200 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 5/8</u>	<u>13.03</u>	<u>.188</u>	<u>0</u>	<u>200</u>

Perforations:
 Type perforation M.H. Slot
 Size perforation 3X3/32
 From 16.0 feet to 200 feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type: Neat Cement
 Depth of Seal 50 Cement Grout
 Placement Method: Pumped Concrete Grout
 Poured
 Gravel Packed: Yes No
 From 5.0 feet to 200' feet

9. WATER LEVEL
 Static water level 45 feet below land surface
 Artesian flow _____ G.P.M. 25 P.S.I.
 Water temperature Cold °F Quality Good

Date started 1-6, 1997
 Date completed 1-9, 1997

7. WELL TEST DATA

TEST METHOD: <input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift			
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)	
<u>25</u>	<u>60</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 Ar H Pump Co. Contractor
 Address 5551 Hwy 50 E #3 Contractor
Carson City NV 89701
 Nevada contractor's license number issued by the State Contractor's Board 31839
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1905
 Signed Michael L Haek
 By driller performing actual drilling on site or contractor
 Date 1/9/97