

OFFICE USE ONLY
 Log No. 68800
 Permit No. _____
 Basin 27

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. 34703
 ADDRESS AT WELL LOCATION 950 SO. ROCK BLVD
SPARKS, NV 89502

1. OWNER WESTERN NV. SUPPLY CO. ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS 950 SO. ROCK BLVD. _____
SPARKS, NV 89502 _____
 2. LOCATION NE 1/4 SW 1/4 Sec. 8 T. 19 R. 20 E. WASHOE County _____
 PERMIT NO. MO 1035 Issued by Water Resources _____ Parcel No. 034-050-06 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 USA

6. LITHOLOGIC LOG

MW-2 Material	Water Strata	From	To	Thickness
<u>PULL COVER</u>				
<u>RUN A ROD</u>				
<u>BREAK BOTTOM END OFF OF PVC</u>				
<u>Pump cement from the bottom up to 6'</u>				
<u>Pull ALL PVC</u>				
<u>Pump PVC to 65'</u>				
<u>CONCRETE @ SURFACE</u>				

8. WELL CONSTRUCTION

Depth Drilled _____ Feet Depth Cased _____ Feet

HOLE DIAMETER (BIT SIZE)

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

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>4.5"</u>		<u>SCH 40</u>	<u>0</u>	<u>5</u>

Perforations:

Type perforation _____
 Size perforation _____
 From 5 feet to 25 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type: Neat Cement
 Depth of Seal 25 Cement Grout
 Placement Method: Pumped Concrete Grout
 Poured

Gravel Packed: Yes No
 From _____ feet to _____ feet

Date started 8-6 1997
 Date completed _____ 19____

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

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

9. WATER LEVEL

Static water level 6'5" 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 NEVADA DRILLING INC Contractor
 Address 75 LEWERS CREEK RD Contractor
CARSON CITY NV 89704
 Nevada contractor's license number issued by the State Contractor's Board 13697A
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1902
 Signed John S. Reineck
 By driller performing actual drilling on site or contractor
 Date 8-11-97