

OFFICE USE ONLY
Log No. 69171
Permit No. _____
Basin. 90
(Circular stamp with '15868' and an arrow)

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. 15868

1. OWNER Shell ADDRESS AT WELL LOCATION Shell
MAILING ADDRESS 898 N. TAHOE BLVD 898 N. TAHOE BLVD
Encine Village Nev. Encine Village Nev.
2. LOCATION SW 1/4 NE 1/4 Sec. 15 T. 16 N. R. 18 E. Washoe County
PERMIT NO. NA 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 PERMITS

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>Slightly sand to fine to coarse sand</u>		<u>0</u>	<u>46</u>	<u>46</u>
<u>some gravel</u>			<u>46</u>	<u>46</u>
<u>70% Fine to coarse sand</u>		<u>46</u>		
<u>30% Fine to coarse sand</u>			<u>54</u>	<u>8</u>
<u>gravel</u>			<u>54</u>	<u>8</u>
<u>clayey sand</u>		<u>54</u>		
<u>Med. Ben. 65%</u>				
<u>Fine sand 26% clay</u>			<u>55</u>	<u>1</u>
<u>15% Fine gravel</u>			<u>55</u>	<u>1</u>

8. WELL CONSTRUCTION
Depth Drilled 55 Feet Depth Cased 55 Feet
HOLE DIAMETER (BIT SIZE)
From 10" Inches To 55 Feet
Inches _____ Feet _____ Feet
Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>2"</u>	<u>PVC</u>	<u>Sch. 40</u>	<u>0</u>	<u>30</u>

Perforations:
Type perforation slot
Size perforation .020
From 30 feet to 55 feet
From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
Depth of Seal 24 Neat Cement
Placement Method: Pumped Cement Grout
 Poured Concrete Grout
Gravel Packed: Yes No
From 27 feet to 55 feet

9. WATER LEVEL
Static water level 38.5 feet below land surface
Artesian flow NA G.P.M. NA P.S.I.
Water temperature NA °F Quality NA

Date started 9-15 1997
Date completed 9-15 1997

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift			
<u>NO TEST</u>			

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name Layne Christensen Contractor
Address 11001 Edwards Ave Contractor
Fontana, CA 92337
Nevada contractor's license number #0019101
issued by the State Contractor's Board.
Nevada driller's license number issued by the #1468
Division of Water Resources, the on-site driller.
Signed Steve Johnson
By driller performing actual drilling on site or contractor
Date 9/29/97