

Log No. 62674
 Permit No. 92B
 Basin 92B

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. 21863

1. OWNER LEONA GALAU
 MAILING ADDRESS 11585 Overland Reno, Nevada 89506
 ADDRESS AT WELL LOCATION Same

2. LOCATION SE 1/4 NE 1/4 Sec 15 T. 21N N/S R. 19 E Washoe County
 PERMIT NO. 080-395-04 Issued by Water Resources Parcel No. Lenmon Valley 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
DOMESTIC WELL ABANDONMENT:				
Static water level @131 feet				
Total depth @140 feet				
Method used:				
Mix & pump 21 sacks neat cement to fill casing to surface. Cut off casing below grade and backfill to grade with native material.				
NOTE: Casing was not perforated, as directed by Tom Gallagher at DWR via phone 8-21-97.				
Materials used:				
21 sackd of Portland Cement Type II				
Equipment used:				
F-800 Water Truck, F-450 Support Truck, Generator, Mixer, Cement Pump				
Location:				
10 ft. S of N corner & 10 ft. E of W corner				

8. WELL CONSTRUCTION

Depth Drilled..... Feet Depth Cased..... Feet

HOLE DIAMETER (BIT SIZE)

From	To
..... Inches..... Feet..... Feet	
..... Inches..... Feet..... Feet	
..... Inches..... Feet..... Feet	

CASING SCHEDULE

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

Perforations:

Type perforation.....
 Size perforation.....

From	feet to	feet
From.....	feet to.....	feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout

Depth of Seal.....
 Placement Method: Pumped Poured
 Poured

Gravel Packed: Yes No
 From..... feet to..... feet

Date started..... 8-26-97 19.....
 Date completed..... 8-26-97 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..... 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 RENO, NEVADA 89510 Contractor

Nevada contractor's license number issued by the State Contractor's Board..... 0022549
 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..... August 29, 1997