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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. 37841

1. OWNER ROBERT FLORES ADDRESS AT WELL LOCATION 285 Shetland Cir.
 MAILING ADDRESS 200 Shetland Cir. Reno, Nevada 89506
 2. LOCATION SW 1/4 SE 1/4 Sec. 19 T. 23N N/S R. 18 E Washoe County
 PERMIT NO. 078-211-20 Rancho Haven
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 MUD

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Top soil		0	3	3
Soft rusty brown sands		3	7	4
Brown sands		7	17	10
Brown sandy clay, some decomposed granite		17	56	39
Rusty brown sands	X	56	71	15
Decomposed granite with brown clay streaks		71	103	32
Weather granite some clay streaks		103	119	16
White granite, hard		119	121	2
Weathered granite with clay streaks		121	189	68
Soft fracture with clay	X	189	211	22
White granite		211	219	8
Soft fracture	X	219	226	7
Weathered granite		226	230	4
White hard granite		230	237	7

8. WELL CONSTRUCTION
 Depth Drilled 237 Feet Depth Cased 237 Feet
 HOLE DIAMETER (BIT SIZE)
 From To
10 Inches 0 Feet 50 Feet
8 1/5 Inches 50 Feet 237 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	237

Perforations:
 Type perforation factory sawed slot
 Size perforation 3/32 x 3 x 5 around
 From 97 feet to 117 feet
 From 177 feet to 197 feet
 From 212 feet to 232 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 237 feet

9. WATER LEVEL
 Static water level 65 feet below land surface
 Artesian flow _____ G.P.M. 10 P.S.I.
 Water temperature cold °F Quality clear

Date started 5-27-98, 19____
 Date completed 6-2-98, 19____

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 checked="" type="checkbox"/> Air Lift	<u>10</u>		

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 0022549
 Nevada driller's license number issued by the Division of Water Resources, on-site driller 923
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date June 5, 1998