

OFFICE USE ONLY
 Log No. 72476
 Permit No. 99
 Basin. 3481

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. 3481

1. OWNER Robins Paula Rightmier ADDRESS AT WELL LOCATION 14255 Rancho Dr. Reno, NV.
 MAILING ADDRESS 3460 Brant Street Reno, NV. 89506

2. LOCATION SE 1/4 NW 1/4 Sec 22 T 23 N/S R 18 E Washoe County Red Rock
 PERMIT NO. 0059-06 Issued by Water Resources 087-111-26 Parcel No. Red Rock 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
<u>Black Sandy Soil</u>		<u>0</u>	<u>30</u>	
<u>Brown Decomposed G.</u>		<u>30</u>	<u>45</u>	
<u>White Granite</u>		<u>45</u>	<u>60</u>	
<u>Broken Granite</u>		<u>60</u>	<u>155</u>	
<u>Solid Hard Granite</u>		<u>155</u>	<u>165</u>	

8. WELL CONSTRUCTION
 Depth Drilled 165' - 160' Depth Cased 160' Feet
 HOLE DIAMETER (BIT SIZE)
 From 10" 8' Inches 0 Feet 165' Feet
 To _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6"</u>		<u>.219</u>	<u>0</u>	<u>160'</u>

Perforations:
 Type perforation Factory
 Size perforation 1 7/8"
 From 14.0 feet to 160' feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

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

Depth of Seal 54'
 Placement Method: Pumped Poured

Gravel Packed: Yes No
 From 54' feet to 160' feet

9. WATER LEVEL
 Static water level _____ feet below land surface
 Artesian flow 1 gpm G.P.M. _____ P.S.I.
 Water temperature 60.0 °F Quality _____

Date started 7-30-97
 Date completed 7-3-97

7. WELL TEST DATA

TEST METHOD: <input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift			
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)	

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.

Name Turner Drilling & Pump Contractor
 Address 714-350 Hwy 395 East Contractor
Susanville CA. 96130

Nevada contractor's license number issued by the State Contractor's Board 41661
 Nevada driller's license number issued by the Division of Water Resources the on-site driller 2037

Signed Frank Turner
 By driller performing actual drilling on site or contractor
 Date 7/31/97