

OFFICE USE ONLY  
 Log No. 72884  
 Permit No. 899  
 Basin 899

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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. 38832

1. OWNER Mary & Gary Romero ADDRESS AT WELL LOCATION 4200 Partridge Ln  
 MAILING ADDRESS New Washoe City Partridge New Washoe City  
 2. LOCATION NW 1/4 NW 1/4 Sec. 31 T. 17 N. S. R. 20 E. Washoe County  
 PERMIT NO. 050-413-37 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	Thickness
<u>Cobbles and Sands</u>		<u>0</u>	<u>8</u>	<u>8</u>
<u>Obsidian Gravels tight to matrix.</u>		<u>8</u>	<u>80</u>	<u>72</u>
<u>Brown Clay</u>		<u>80</u>	<u>170</u>	<u>90</u>
<u>Soft Sands and Clay Strata</u>		<u>170</u>	<u>200</u>	<u>30</u>
<u>Gray Gummy Clay</u>		<u>200</u>	<u>215</u>	<u>15</u>
<u>Coarse Gravels Fractured Rocks</u>	<u>NA</u>	<u>215</u>	<u>240</u>	<u>25</u>

8. WELL CONSTRUCTION  
 Depth Drilled 240 Feet Depth Cased 240 Feet  
 HOLE DIAMETER (BIT SIZE)  
 From 10 3/4 Inches To 0 Feet 240 Feet  
 .....Inches.....Feet.....Feet  
 .....Inches.....Feet.....Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 5/8</u>	<u>17.23</u>	<u>1.98</u>	<u>0</u>	<u>240</u>

Perforations:  
 Type perforation Mill Slot  
 Size perforation 3 x 1/32  
 From 220 feet to 240 feet  
 From.....feet to.....feet  
 From.....feet to.....feet  
 From.....feet to.....feet  
 From.....feet to.....feet

Surface Seal:  Yes  No Seal Type:  
 Neat Cement  
 Depth of Seal 50  Cement Grout  
 Placement Method:  Pumped  Concrete Grout  
 Poured  
 Gravel Packed:  Yes  No  
 From 50 feet to 240 feet

9. WATER LEVEL  
 Static water level 85 feet below land surface  
 Artesian flow.....G.P.M. 25 P.S.I.  
 Water temperature Cold °F Quality Good

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.  
 Name Capital City Well Drilling  
 Address 80 KIF BAY DR.  
Carson City NV. 89706  
 Nevada contractor's license number issued by the State Contractor's Board 41775  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1908  
 Signed Michael Heek  
 By driller performing actual drilling on site or contractor  
 Date 8-3-98

Date started 7-30, 1998  
 Date completed 7-31, 1998

7. WELL TEST DATA

TEST METHOD: <input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift		
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>25</u>	<u>60</u>	<u>3 HRS</u>

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