

STATE OF NEVADA
 DIVISION OF WATER RESOURCES

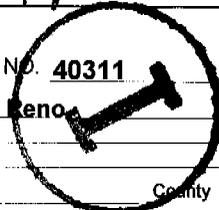
OFFICE USE ONLY
 Log No. 77134
 Permit No. _____
 Basin 99

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. 40311



1. OWNER Chris & Genevieve Diebler ADDRESS AT WELL LOCATION 245 Cinch Circle Reno, NV 89506
 MAILING ADDRESS 15730 Dry Valley Rd Reno, NV 89506

2. LOCATION SE 1/4 SE 1/4 Sec. 11 T. 23 N/S R. 18 E. Washoe County
 PERMIT NO. 078-18-408 Parcel No. _____ Subdivision Name _____
 Issued by Water Resources _____

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
Fine & coarse brown sand		0	20	
Gray & brown clay with white & black course sand		20	40	20
Multi colored sands & gravels		40	55	15
Gray clay with multi colored course sand		55	70	15
Brown clay with multi colored course sand		70	80	10
Multi colored course sand		80	110	30
Multi colored course sand with gray sandy clay		110	120	10
Multi colored course sand & gravels with brown clay		120	155	35
T.D. 155'				

8. WELL CONSTRUCTION

Depth Drilled 155 Feet Depth Cased 155 Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet	Feet
<u>10 5/8</u>	<u>0</u>	<u>155</u>		

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 5/8</u>	<u>13.92</u>	<u>.188</u>	<u>+1 1/2</u>	<u>155</u>

Perforations:
 Type perforation Johnson screen
 Size perforation .030

From	feet to	feet
<u>155</u>	<u>135</u>	<u>feet</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Surface Seal: Yes No Seal Type: Neat Cement Cement Grout Concrete Grout
 Depth of Seal 50'
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From 155 feet to 50 feet

Date started 6/28/99, 19____
 Date completed 6/29/99, 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>20+</u>		<u>2 hours</u>

9. WATER LEVEL

Static water level 10 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature cold °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 A.S.A.P. Pump & Well Service, Inc. Contractor
 Address P.O. Box 60130 Contractor
Reno, NV 89506
 Nevada contractor's license number issued by the State Contractor's Board 2066
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 35387-A
 Signed [Signature]
 By driller performing actual drilling on-site or contractor
 Date 7/1/99