

OFFICE USE ONLY  
 Log No. 17225  
 Permit No. \_\_\_\_\_  
 Basin 97

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. 38599

1. OWNER Equilon Enterprises, LLC ADDRESS AT WELL LOCATION Shell station  
 MAILING ADDRESS P.O. Box 6249 4101 S. VIRGINIA ST. RENO, NV  
Carson - CA 90749  
 2. LOCATION SW 1/4 NE 25 T 19 S R 19 E Washoe County  
 PERMIT NO. NONE Issued by Water Resources Parcel No. 024-150-03 Subdivision Name \_\_\_\_\_

3. WORK PERFORMED  
 New Well  Replace  Recondition  
 Deepen  Abandon  Other Drilling

4. PROPOSED USE  
 Domestic  Irrigation  Test  
 Municipal/Industrial  Monitor  Stock

5. WELL TYPE  
 Cable  Rotary  RVC  
 Air  Other Permiss. O.J. Hammer

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>50% Bay clay</u>		<u>0</u>		
<u>50% sand + gravel</u>		<u>4</u>	<u>4</u>	<u>4</u>
<u>50% Fine to coarse sand</u>		<u>4</u>		
<u>40% Fine to coarse gravel</u>				
<u>10% large gravel to boulders</u>		<u>25</u>	<u>21</u>	

8. WELL CONSTRUCTION  
 Depth Drilled 25 Feet Depth Cased 0 Feet  
 HOLE DIAMETER (BIT SIZE)  
 From 10 Inches To 25 Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>NONE</u>				

Perforations:  
 Type perforation \_\_\_\_\_  
 Size perforation \_\_\_\_\_  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  
 Depth of Seal 25  Neat Cement  
 Placement Method:  Pumped  Cement Grout  
 Poured  Concrete Grout  
 Gravel Packed:  Yes  No  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

9. WATER LEVEL  
 Static water level 21.30 feet below land surface  
 Artesian flow NA G.P.M. NA P.S.I.  
 Water temperature NA °F Quality NA

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.  
 Name Layne Christensen Contractor  
 Address 11001 Edwards Ave Contractor  
Fontana - CA 92337  
 Nevada contractor's license number issued by the State Contractor's Board 0019101  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1468  
 Signed Steve Johnson  
 By driller performing actual drilling on site or contractor  
 Date 4-21-99

Date started 4-21, 1999  
 Date completed 4-21, 1999

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input checked="" type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift			
<u>NONE</u>			

Boring # B  
Collect water sample  
grout up hole