

STATE OF NEVADA
 DIVISION OF WATER RESOURCES
WELL DRILLER'S REPORT

OFFICE USE ONLY
 Log No. 78459
 Permit No. _____
 Basin 90

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. 39368

1. OWNER Incline Village GID ADDRESS AT WELL LOCATION Country Club Drive
 MAILING ADDRESS 893 Southwood Blvd
Incline Village, NV 89451

2. LOCATION NE 1/4 NE 1/4 Sec. 10 T 16 N 18 E Washoe County
 PERMIT NO. 64259 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 _____

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Decomposed granite & tree branches		0	30	30
Decomposed granite & br. clay		30	60	30
decomposed granite w/granite boulders		60	72	12
gray granite		72	80	8
br. clay-granite cobbles		80	92	12
granite sand		92	102	10
gray granite		102	108	6
granite sand w/granite boulders		108	135	27
gray granite		135	145	10
gray granite fractures & clay		145	150	5
consolidated sand		150	185	35
br. clay		185	200	15
sand		200	210	10
volcanic		210	380	170
volcanic & clay		380	385	5
hard gray granite		385	427	42
volcanic w/clay		427	462	35
gray granite		462	467	5
red volcanic w/some clay		467	480	13
br. clay		480	510	30
test well abandoned w/7 sack grout-no casing installed				

8. WELL CONSTRUCTION
 Depth Drilled 510 Feet Depth Cased 0 Feet
 HOLE DIAMETER (BIT SIZE)
7 7/8 Inches From 0 Feet To 510 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
	<u>N/A</u>			

Perforations:
 Type perforation N/A
 Size perforation _____
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From N/A feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

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

9. WATER LEVEL
 Static water level 4 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °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 Humboldt Drilling & Pump Co., Inc. Contractor
 Address 4675 W. Winnemucca Blvd Contractor
Winnemucca, Nevada 89445

Nevada contractor's license number issued by the State Contractor's Board 015234

Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1713

Signed Tom G. Tomp
 By driller performing actual drilling on-site or contractor
 Date 8/17/99

Date started 5/26/99, 19____
 Date completed 5/28/99, 19____

7. WELL TEST DATA

TEST METHOD:	DRAW DOWN		TIME (HOURS)
	BAILER	PUMP	
(Feet Below Static)	(Feet Below Static)	(Feet Below Static)	(Hours)
<u>20 MIN</u>			
<u>30 MIN</u>			
<u>1 HOUR</u>			
<u>2 HOURS</u>			
<u>3 HOURS</u>			

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 STATE ENGINEERS DIVISION

