

OFFICE USE ONLY
 Log No. 82234
 Permit No. 87
 Basin T
 NOTICE OF INTENT NO. 44140

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

1. OWNER Ms. Rebecca Helmes (Edgewood Properties) ADDRESS AT WELL LOCATION same
 MAILING ADDRESS 800 E. Nichols Blvd Sparks, NV 89434
 2. LOCATION SW 1/4, SW 1/4 Sec 3, T. 19, R. 20 E, Washoe County
 PERMIT NO. 1710-1208 Issued by Water Resources Parcel No. 037-012-02 Subdivision Name Innsbrook Village Apts

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	Thickness
<u>B9</u>	<u>MW3</u>			
<u>A/C</u>		<u>0</u>	<u>0³</u>	<u>0³</u>
<u>basalt</u>		<u>0³</u>	<u>1</u>	<u>0³</u>
<u>clay (CH)</u>		<u>1</u>	<u>7⁵</u>	<u>6⁵</u>
<u>gravel (GP)</u>	<u>18⁵</u>	<u>7⁵</u>	<u>25</u>	<u>17⁵</u>

8. WELL CONSTRUCTION
 Depth Drilled 25 Feet Depth Cased 25 Feet
 HOLE DIAMETER (BIT SIZE)
 From 7.5 Inches To 2.5 Feet
 _____ Inches _____ Feet
 _____ Inches _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>2.375</u>	<u>0.70</u>	<u>0.308</u>	<u>0</u>	<u>25</u>

Perforations:
 Type perforation slotted
 Size perforation 0.220
 From 5 feet to 25 feet
 From _____ feet to _____ feet

Surface Seal: Yes No hole plug (1-3')
 Depth of Seal 0-3
 Placement Method: Pumped Poured
 Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout
 Gravel Packed: Yes No
 From 3 feet to 25 feet

9. WATER LEVEL
 Static water level 18.5 feet below land surface
 Artesian flow NR G.P.M. N/A P.S.I.
 Water temperature 44.0 °F Quality Murky

Date started 12/19/00, 19____
 Date completed 12/19/00, 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 type="checkbox"/> Air Lift			

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Dale A Lehman Contractor
 Address 520 Edison Way Reno NV 89502
 Nevada contractor's license number issued by the State Contractor's Board _____
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller M-1976
 Signed Dale A Lehman
 By driller performing actual drilling on site or contractor
 Date 12/19/00