

STATE OF NEVADA
 DIVISION OF WATER RESOURCES

OFFICE USE ONLY
 Log No. 831669
 Permit No. _____
 Basin 104

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. 46621

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

1. OWNER Dean Watts ADDRESS AT WELL LOCATION 3050 Kings Canyon Road
 MAILING ADDRESS 3050 Kings Canyon Road Carson City, Nevada 89704
Carson City, NV 89704

2. LOCATION SW 1/4 SW 1/4 Sec. 13 T 15N N/S R 19E E Carson City County
 PERMIT NO. _____
 Issued by Water Resources 7-081-11 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
<u>Green, White Granite</u>				
<u>Hard & Fractured</u>		<u>93</u>	<u>108</u>	<u>15</u>
<u>Green, White, Yellow</u>				
<u>Brown Granite</u>				
<u>Semi Decomposed</u>				
<u>with hard zone</u>	<u>X</u>	<u>108</u>	<u>298</u>	<u>190</u>
<u>T.D. 298</u>				
<u>Plugged By Well Log 124195</u>				
<u>Replaced By Well Log 124196</u>				

8. WELL CONSTRUCTION

Depth Drilled 298 Feet Depth Cased 298 Feet

HOLE DIAMETER (BIT SIZE)

	From	To
<u>7-7/8</u> Inches	<u>93</u> Feet	<u>298</u> Feet
_____ Inches	_____ Feet	_____ Feet
_____ Inches	_____ Feet	_____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/FL (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6</u>	<u>5.96</u>	<u>.188</u>	<u>78</u>	<u>298</u>

Perforations:
 Type perforation Factory sawed
 Size perforation 1/8 x 3

From	To
<u>298</u> feet to	<u>278</u> feet
<u>258</u> feet to	<u>238</u> feet
_____ feet to	_____ feet
_____ feet to	_____ feet
_____ feet to	_____ feet

Surface Seal: Yes No
 Depth of Seal In Place
 Placement Method: Pumped Poured
 Seal Type: Neat Cement Cement Grout Concrete Grout

Gravel Packed: Yes No
 From Existing feet to _____ feet

Date started 06/01/2001 .19
 Date completed 06/05/2001 .19

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailor <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	<u>10</u>	<u>240</u>	<u>5-1/2 hour</u>

9. WATER LEVEL
 Static water level 90 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature cool °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 A.S.A.P. Pump & Well Service Contractor
 Address P.O. Box 60130 Contractor
Reno, Nevada
 Nevada contractor's license number issued by the State Contractor's Board 36387-B
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1511
 Signed [Signature]
 By driller performing actual drilling on-site or contractor
 Date 06/07/2001

RECEIVED
 01 JUN 12 AM 11:17
 STATE ENGINEERING OFFICE

Original Well Log # 20635