

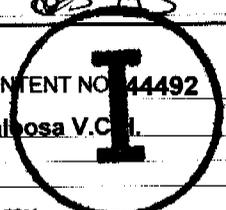
STATE OF NEVADA
 DIVISION OF WATER RESOURCES
WELL DRILLER'S REPORT

OFFICE USE ONLY
 Log No. 8384
 Permit No. _____
 Basin 83 83

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. **44492**



1. OWNER **Michael Kemper** ADDRESS AT WELL LOCATION **21640 Apaloosa V.C.H.**
 MAILING ADDRESS **21640 Apaloosa V.C.H. Reno, NV 89511**

2. LOCATION **NE** 1/4 **NW** 1/4 Sec. **32** T **18N** N/S R **21E** E **Storey** County
 PERMIT NO. **003-022-44** 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	Thickness
Purple rock		177	205	28
Purple/white rock		205	212	7
Purple/green rock				
w/gray clay		212	227	15
Purple/green rock	x	227	270	43
Green rock with gray clay		270	275	5
White/purple/green rock w/white clay		275	350	75
Black/green/white rock	x	350	385	35
Black/green/brown/red rock	x	385	410	25

8. WELL CONSTRUCTION
 Depth Drilled **410** Feet Depth Cased **410** Feet

HOLE DIAMETER (BIT SIZE)

	From	To	Feet	Feet
6 1/8 Inches	177	410		
Inches			Feet	Feet
Inches			Feet	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
5"	10.79	.188	170	350

Perforations:
 Type perforation **Factory**
 Size perforation **3/32 x 3"**

From	feet to	feet
	350	410
From	feet to	feet

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

Gravel Packed: Yes No
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level **121** feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature **cool** °F Quality **not tested**

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name **Bruce MacKay Pump & Well Service, Inc.** Contractor
 Address **1600 Mt. Rose Hwy** Contractor
Reno, NV 89511
 Nevada contractor's license number issued by the State Contractor's Board **23096**
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1719**
 Signed *R. Bruce MacKay*
 By driller performing actual drilling on-site or contractor
 Date **3/20/01**

Date started **3/19/2001**, 19
 Date completed **3/20/2001**, 19

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
Air	25+		1 hour