

OFFICE USE ONLY
 Log No. 85215
 Permit No. _____
 Basin 107

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. 47418

1. OWNER DALE ROSASCHI ADDRESS AT WELL LOCATION 2671 HWY 338 WASHINGTON NV
 MAILING ADDRESS _____
 2. LOCATION SE 1/4 SW 1/4 Sec 15 T. 7 R. 25 N/S R. 25 Douglas County
 PERMIT NO. N/A 10-921-03 Sweet Water 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 RVG
 Air Other man

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>Dirt & Cabbles</u>		<u>0</u>	<u>3'</u>	<u>3'</u>
<u>Boulders & gravel</u>		<u>3'</u>	<u>185'</u>	<u>177'</u>
<u>Granite Bedrock</u>		<u>185'</u>	<u>200'</u>	<u>15'</u>

8. WELL CONSTRUCTION
 Depth Drilled 200 Feet Depth Cased 185' Feet
 HOLE DIAMETER (BIT SIZE)
 From _____ To _____
 Inches _____ Feet _____ Feet
 Inches _____ Feet _____ Feet
 Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 5/8</u>	<u>1300</u>	<u>.188</u>	<u>+1</u>	<u>20'</u>
<u>6 3/8</u>	<u>900</u>	<u>SDR 2.1</u>	<u>20</u>	<u>160'</u>
<u>5" OD</u>	<u>900</u>	<u>.183</u>	<u>105'</u>	<u>185</u>

Perforations:
 Type perforation FACTORY
 Size perforation 1/8 X 3 6 Rows
 From _____ feet to _____ feet
 From 125' feet to 185' feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 100' Neat Cement
 Placement Method: Pumped Concrete Grout
 Poured
 Gravel Packed: Yes No
 From 100' feet to 160' feet

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

Date started 7/23/01, 19_____
 Date completed 8/15/01, 19_____
 7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>Air Lift 10 Gpm.</u>		<u>7 Hrs</u>

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Leach Drilling Inc. Contractor
 Address PO Box 599 Contractor
Silver Springs NV 89429
 Nevada contractor's license number 0031841
 issued by the State Contractor's Board.
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1872
 Signed Nathaniel V. Leach
 By driller performing actual drilling on site or contractor
 Date 8/24/01