

PRINT OR TYPE ONLY
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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. 50367

1. OWNER Daniel Schuchet ADDRESS AT WELL LOCATION 5485 Wildwood Dr. Reno, NV
 MAILING ADDRESS 5485 Wildwood Dr. Reno, NV 89510
 2. LOCATION NW 1/4 NW 1/4 Sec. 2 T. 17 N. R. 19 E. Washoe County
 PERMIT NO. WL 020089 Parcel No. 04554219 Subdivision Name _____
Issued by Water Resources

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>Abandon Well</u>				
<u>6" well 155' Deep</u>				
<u>Part Well from</u>		<u>155</u>	<u>95</u>	
<u>Mill Slot</u>				
<u>Pump Nest Cement</u>				
<u>from 155 to Surface</u>				
<u>1.5 yards Used</u>				
<u>Cut off 1.5'</u>				
<u>table water level 151</u>				
<u>Inspected by</u>				
<u>Washoe County</u>				
<u>District Health</u>				
<u>Luke Lukins</u>				

8. WELL CONSTRUCTION
 Depth Drilled 155 Feet Depth Cased 155 Feet

HOLE DIAMETER (BIT SIZE)
 From 6 5/8 inches To _____
 _____ inches _____ feet _____ feet
 _____ inches _____ feet _____ feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6"</u>				

Perforations:
 Type perforation _____
 Size perforation _____
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout

Depth of Seal _____
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From _____ feet to _____ feet

Date started _____, 20____
 Date completed 29, 2002

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			

9. WATER LEVEL
 Static water level 151 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 Nevada Pump & Drilling Contractor
 Address PO Box 2227 Contractor
Dayton, New 89403
 Nevada contractor's license number 046357
 issued by the State Contractor's Board
 Nevada driller's license number issued by the 1790
 Division of Water Resources, the on-site driller.
 Signed minty kopy
 By driller performing actual drilling on site or contractor
 Date 9-6-02

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 STATE ENGINEERS OFFICE