

OFFICE USE ONLY  
 Log No. 92062  
 Permit No. \_\_\_\_\_  
 Basin 104

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. 46081

1. OWNER Hygienetics Environmental Services ADDRESS AT WELL LOCATION 2669 N. Carson St. Carson City, Nevada 89704  
 MAILING ADDRESS 2433 Mariner Square Loop Suite 210 Alameda, Ca. 94501  
 2. LOCATION SE 1/4 NW 1/4 Sec 8 T. 15 N. S. R. 20 E Carson City County  
 PERMIT NO. 002-061-35 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 Auger

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Asphalt		0'	0.5'	0.5'
Back fill Gravel		0.5'	1'	0.5'
Silt - Reddish Brown - Dry		1'	5.5'	4.5'
Silty SAND - Reddish Brown Wet	✓	5.5'	12'	6.5'
Sandy Silt - Fine Grain - Brown - Wet	✓	12'	16'	4'
Sandy Silt - Fine Grain - Brown - Saturated	✓	16'	20'	4'

8. WELL CONSTRUCTION  
 Depth Drilled 20' Feet Depth Cased 20' Feet  
 HOLE DIAMETER (BIT SIZE)  
 From To  
8" Inches 0' Feet 20' Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 CASING SCHEDULE  

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>2"</u>	<u>26.40</u>	<u>P.V.C.</u>	<u>0'</u>	<u>5'</u>

 Perforations:  
 Type perforation Factory Cut  
 Size perforation 0.010"  
 From 5' feet to 20' feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 Surface Seal:  Yes  No Seal Type:  
 Depth of Seal 4'  Neat Cement  
 Placement Method:  Pumped  Cement Grout  
 Poured  Concrete Grout Bent. Chips 2'-4'  
 Gravel Packed:  Yes  No  
 From 4' feet to 20' feet

9. WATER LEVEL  
 Static water level 6' feet below land surface  
 Artesian flow No G.P.M. \_\_\_\_\_ P.S.I. \_\_\_\_\_  
 Water temperature \_\_\_\_\_ °F Quality \_\_\_\_\_

Date started 1-22- 2004  
 Date completed 1-22- 2004

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 Phillip Crower Contractor for Bost Longyear Co.  
 Address P.O. Box 1000 Dayton, NV. 89403  
32 Stokes Dr. Dayton, NV. 89403  
 Nevada contractor's license number issued by the State Contractor's Board 0010157  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller M-2148  
 Signed Phillip E. Crower  
 By driller performing actual drilling on site or contractor  
 Date 1-23-04