

STATE OF NEVADA
 DIVISION OF WATER RESOURCES

OFFICE USE ONLY
 Log No. 94491
 Permit No. _____
 Basin 88

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. 53978

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

1. OWNER Ralph Demarzo
 MAILING ADDRESS 5465 Goldenrod Reno, NV 89511
 ADDRESS AT WELL LOCATION 5465 Goldenrod

2. LOCATION SE 1/4 NW 1/4 Sec. 02 T 17N N/S R 19E E Washoe County
 PERMIT NO. 045-532-06 Parcel No. _____
 Issued by Water Resources _____
 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
Brown sandy clay some gravel		129	170	41
Soft zone	x	170	185	15
Brown sandy clay with gravel		185	199	14
Soft zone	x	199	211	12
Brown sandy clay with gravel		211	241	30
Soft zone	x	241	256	15
Brown sandy clay some gravel		256	265	9

Washoe County Well Permit # WL 040284

DCNR/DWR RECEIVED
 DEC 02 2004
 LAS VEGAS OFFICE

8. WELL CONSTRUCTION
 Depth Drilled 265 Feet Depth Cased 265 Feet

HOLE DIAMETER (BIT SIZE)
 From 6 1/8 Inches To 129 Feet
 To 265 Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
5	10.79	.188	125	265

Perforations:
 Type perforation Machine cut
 Size perforation 3/32 x 3

From	feet to	feet
From <u>175</u>	feet to	<u>195</u> feet
From <u>215</u>	feet to	<u>255</u> feet
From _____	feet to	_____ feet
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 120 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 923
 Signed R. Bruce MacKay
 By driller performing actual drilling on-site or contractor
 Date 10/7/2004

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>25+</u>		<u>3</u>