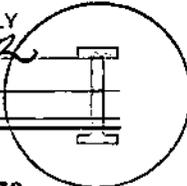


STATE OF NEVADA  
 DIVISION OF WATER RESOURCES  
**WELL DRILLER'S REPORT**

OFFICE USE ONLY  
 Log No. 940426  
 Permit No. \_\_\_\_\_  
 Basin 89



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. **52178**

1. OWNER George Bay ADDRESS AT WELL LOCATION 4070 Woodcock  
 MAILING ADDRESS 4070 Woodcock  
Washoe Valley, NV 89704

2. LOCATION SE 1/4 NE 1/4 Sec. 32 T 17N N/S R 20E E Washoe County  
 PERMIT NO. 050-416-15 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
Gray granite soft		170	210	40
Gray granite		210	241	31
Hard gray granite		241	250	9
Fracture	x	250	254	4
Gray granite		254	266	12
Fracture	x	266	267	1
Gray granite		267	290	23
Fracture		290	293	3
Gray granite		293	300	7

Washoe county well permit # WL 040135

8. WELL CONSTRUCTION  
 Depth Drilled 300 Feet Depth Cased 300 Feet

HOLE DIAMETER (BIT SIZE)

	From	To
<u>6 1/8</u> Inches	<u>170</u> Feet	<u>300</u> Feet
_____ Inches	_____ Feet	_____ Feet
_____ Inches	_____ Feet	_____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>5</u>	<u>10.79</u>	<u>.188</u>	<u>90</u>	<u>300</u>

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

From	feet to	feet
<u>240</u>	<u>300</u>	<u>300</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

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

9. WATER LEVEL  
 Static water level 100 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 6/28/2004

Date started 6/23/2004 19  
 Date completed 6/23/2004 19

7. WELL TEST DATA

TEST METHOD:	TEST METHOD:		Time (Hours)
	G.P.M.	Draw Down (Feet Below Static)	
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	<u>50+</u>		<u>3</u>

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