

STATE OF NEVADA
 DIVISION OF WATER RESOURCES

OFFICE USE ONLY
 Log No. 98380
 Permit No. _____
 Basin 085

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. **55328**

1. OWNER **Richard Dominguez**
 MAILING ADDRESS **180 Mia Dr. Sparks, NV 89436**
 ADDRESS AT WELL LOCATION **65 La Loma Way. Formerly 715 Encanto Dr. Spanish Sp.**

2. LOCATION **NE SE 1/4 NE SE 1/4 Sec. 08 AT T 21N** N/S R **21E** E **Washoe** County
 PERMIT NO. _____ Issued by Water Resources **076-300-389** 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
Clean well to bottom (1200') run casing to 860'. Casing stoped at 860' Tom Gallagher authorized open hole below 860'. Went out bottom of 860' cased well and found the well had caved in at 865'. Tom Gallagher authorized no further attempt of drilling be required. We developed the well and had 40+ GPM to begin with and 18 GPM after 3 hours. Water cleared up. We know that the well is crooked since we lowered the casing down with drill pipe. We then became stuck going up or down even with 50,000 lbs of pull back and pull down. When we had the well clean to 1200 feet with air, we had over 100 GPM.				
Washoe County Well Permit # WL 050062				
Recommended pump setting in blank casing 800-820'.				
Additional perforations not shown: 760-800' 820-860'				

8. WELL CONSTRUCTION
 Depth Drilled **1200** Feet Depth Cased **860** Feet

HOLE DIAMETER (BIT SIZE)
 From **6 1/8** Inches To **570** Feet
 From _____ Inches To _____ Feet
 From _____ Inches To _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
5"	10.79	.188	200	860

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

From	480 feet to	500 feet
From	520 feet to	560 feet
From	580 feet to	620 feet
From	640 feet to	680 feet
From	700 feet to	740 feet

Surface Seal: Yes No Seal Type:
 Depth of Seal **53** Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout

Gravel Packed: Yes No
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level **380** 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 **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 **7/29/2005**

Date started **7/26/2005**, 19
 Date completed **8/1/2005**, 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			
Air	18		3 Hrs
Air	100	1200	1 Hr