

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



OFFICE USE ONLY

Log No. 99088
 Permit No. _____
 Basin 064

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. **55302**

1. OWNER Bill Taulman ADDRESS AT WELL LOCATION 500 Stirrup Dr. Palomino Valley
 MAILING ADDRESS 7935 Leather Ln. Reno, NV 89506

2. LOCATION NE 1/4 NE 1/4 Sec. 34 T 23N N/S R 21E E Washoe County
 PERMIT NO. 76-450-04 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 _____

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Sand gravel boulders		0	12	12
Brown sandy clay some gravel		12	28	16
Brown sandy clay		28	65	37
Weatherd green granite		65	86	21
Gray granite hard		86	105	19
Weatherd rusty brown granite		105	136	31
Weatherd green & gray granite		136	181	45
Gray granite		181	211	30
Weatherd granite with clay streaks		211	269	58
Gray granite		269	333	64
Soft zone		333	334	1
Gray granite		334	396	62
Soft zone		396	405	9
Gray hard granite		405	449	44
Fracture	x	449	454	5
Gray granite		454	499	45
Fracture	x	499	525	26

Washoe County Well Permit # WL050072

8. WELL CONSTRUCTION
 Depth Drilled 525 Feet Depth Cased 525 Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet	Feet
10 5/8	0	50	0	50
8 5/8	50	525	50	525

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	12.92	.188	+2	525

Perforations:
 Type perforation Machine cut
 Size perforation 3/32 x 3
 From 440 feet to 460 feet
 From 480 feet to 520 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type: Neat Cement
 Depth of Seal 50 Cement Grout
 Placement Method: Pumped Poured Concrete Grout
 Gravel Packed: Yes No
 From 50 feet to 525 feet

9. WATER LEVEL
 Static water level 425 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 12/2/2005

7. WELL TEST DATA

TEST METHOD:	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift		
G.P.M. <u>20</u>		<u>3</u>