

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

OFFICE USE ONLY
 Log No. 99835
 Permit No. _____
 Basin 088

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. **55380**

1. OWNER **Robert Winquist** ADDRESS AT WELL LOCATION **15750 Fawn Ln.**
 MAILING ADDRESS **15750 Fawn Ln.**
Reno, NV 89511

2. LOCATION SW 1/4 SW 1/4 Sec. 36 T 18N N/S R 19E E Washoe County
 PERMIT NO. DDM05-041 Parcel No. 150-242-13 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
Broken brown volcanic rock	x	148	163	15
Gray volcanic rock some clay		163	190	27
Multi colored volcanic rock		190	209	19
Fractured volcanic rock	x	209	214	5
Multi colored volcanic rock some clay		214	250	36
Washoe County Well Permit # WL 050264				

8. WELL CONSTRUCTION
 Depth Drilled 250 Feet Depth Cased 250 Feet
 HOLE DIAMETER (BIT SIZE)
6 1/8 Inches From 148 Feet To 250 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
5	10.79	.188	140	250

Perforations:
 Type perforation **Machine cut**
 Size perforation **3/32 x 3**
 From 150 feet to 170 feet
 From 190 feet to 210 feet
 From 230 feet to 250 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

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

9. WATER LEVEL
 Static water level 135 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 **1/12/2006**

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>30</u>	<u>3</u>	