

STATE OF NEVADA
 DIVISION OF WATER RESOURCES

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WELL DRILLER'S REPORT

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

OFFICE USE ONLY
 Log No. 99866
 Permit No. _____
 Basin 087

NOTICE OF INTENT NO. 56587

1. OWNER Steve Pearson
 MAILING ADDRESS 15630 Fawn Ln. Reno, NV 89511
 ADDRESS AT WELL LOCATION 15630 Fawn Ln.

2. LOCATION NW 1/4 SW 1/4 Sec. 36 T 18N
 PERMIT NO. Dom05-047 150-232-01 N/S R 19E E Washoe County
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	X	138	143	5
Brown clay		143	149	6
Brown volcanic rock		149	186	37
Brown & gray volcanic rock		186	231	45
Soft zone weatherd granite		231	249	18
Weatherd granite		249	317	68
Fracture weatherd granite	X	317	340	23
Weatherd granite		340	350	10

Washoe County Well Permit # WL 060010
 Revised Drillers License number 2-27-06

8. WELL CONSTRUCTION
 Depth Drilled 350 Feet Depth Cased 350 Feet

HOLE DIAMETER (BIT SIZE)
 From 6 1/6 inches To 350 Feet
 inches Feet
 inches 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>130</u>	<u>350</u>

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

From <u>285</u> feet to <u>345</u> feet
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet

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

9. WATER LEVEL
 Static water level 130 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 of contractor
 Date 1/26/2006

7. WELL TEST DATA

TEST METHOD: <input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift			
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)	
<u>35</u>		<u>3</u>	