

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

OFFICE USE ONLY
 Log No. 101532
 Permit No. _____
 Basin 087

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. **57423**

1. OWNER **Alpine Development**
 MAILING ADDRESS **P.O. Box 18010**
Reno, NV 89511

ADDRESS AT WELL LOCATION **5950 Rock Farm Rd. Reno**

2. LOCATION **SW** 1/4 **SW** 1/4 Sec. **26** T **18N** N/S R **19E** E **Washoe** County

PERMIT NO. _____ Issued by Water Resources **150-260-24** 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 **Mud**

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Boulders sand gravel		0	60	60
Cobbles Sand gravel		60	120	60
Boulders sand gravel		120	280	160
Some clay		280	300	20
Boulders sand gravel		300	600	300
Washoe County Permit # WL 050253				
NAD83				
N 39.39282				
W 119.82293				
Additional perforation 540' to 560'				

8. WELL CONSTRUCTION

Depth Drilled **600** Feet Depth Cased **600** Feet

HOLE DIAMETER (BIT SIZE)

	From	To
10 5/8 Inches	0 Feet	100 Feet
9 7/8 Inches	100 Feet	600 Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	12.92	.188	+2	600

Perforations:

Type perforation **Machine cut**

Size perforation **3/32 X 3**

From	feet to	feet
340	360	360
380	400	400
420	440	440
460	480	480
500	520	520

Surface Seal: Yes No Seal Type: Neat Cement Cement Grout Concrete Grout

Depth of Seal **100**

Placement Method: Pumped Poured

Gravel Packed: Yes No

From **100** feet to **600** feet

9. WATER LEVEL

Static water level **150** 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

Date started **7/3/2006**, 19
 Date completed **7/10/2006**, 19

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
50+		3

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 **1790**

Signed R. Bruce MacKay
 By driller performing actual drilling on-site or contractor

Date **7/12/2006**