

OFFICE USE ONLY
 Log No. 34191
 Permit No. _____
 Basin 6-83
 NOTICE OF INTENT NO. 15572

WELL DRILLER'S REPORT

Please complete this form in its entirety

PRINT OR TYPE ONLY

1. OWNER John Sabelberg ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS 2061 Empire Rd VCH # 69 2061 Empire Rd
Reno, Nv 89511 Lot 120 Block N
 2. LOCATION NE 1/4 NE 1/4 Sec 32 T 18 N/S R 21 E Storey County
 PERMIT NO. 30-72-15 Virginia City Highlands
Issued by Water Resources Parcel No. Subdivision Name

3. TYPE OF WORK
 New Well Recondition
 Deepen Other

4. PROPOSED USE
 Domestic Irrigation Test
 Municipal Industrial Stock

5. TYPE WELL
 Cable Rotary
 Other Air

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Brown clay		0	43	43
Brown shale rock with some brown clay		43	101	58
Blue, gray volcanic rock		101	197	96
T.D. 197 feet				

8. 10" - 50' WELL CONSTRUCTION
 Diameter 8 1/2 inches Total depth 197 feet
 Casing record 6 5/8 inch
 Weight per foot 10.78 Thickness .156
 Diameter 6 5/8 inches From +3 feet To 192 feet
 Surface seal: Yes No Type grout
 Depth of seal 50 feet
 Gravel packed: Yes No
 Gravel packed from 50 feet to 197 feet
 Perforations:
 Type perforation factory
 Size perforation 3/32 X 3
 From 157 feet to 177 feet
 From _____ feet to _____ feet

Date started 6/15/90, 19____
 Date completed 6/19/90, 19____

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump
Blew with air to clean and develop.			

9. WATER LEVEL
 Static water level 100 feet below land surface
 Flow 20+ G.P.M. P.S.I. _____
 Water temperature cool °F Quality good

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Aqua Drilling & Well Service, Inc
 Address 625 Spice Islands Dr Suite L Sparks 89431
 Nevada contractor's license number 15291
 Nevada contractor's driller's number 1132
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1509
 Signed Roger M. Thrall
 Date 6/22/90

BAILER TEST
 G.P.M. _____ Draw down _____ feet _____ hours
 G.P.M. _____ Draw down _____ feet _____ hours
 G.P.M. _____ Draw down _____ feet _____ hours