

OFFICE USE ONLY
 Log No. 35828
 Permit No. _____
 Basin 8-103
 14679

WELL DRILLER'S REPORT

Please complete this form in its entirety

PRINT OR TYPE ONLY

NOTICE OF INTENT NO. _____

1. OWNER Carson Highland Estates ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS P. O. Box 21510 10061 Highway 50 East
Carson City, Nv 89721

2. LOCATION SE 1/4 NW 1/4 Sec. 31 T. 16 N/S R. 21 E Lyon County _____
 PERMIT NO. Mo-365 Parcel No. _____ Moundhouse Subdivision Name _____
Issued by Water Resources

3. TYPE OF WORK
 New Well Recondition
 Deepen Other

4. PROPOSED USE
 Domestic Irrigation Monitor
 Municipal Industrial Stock Test

5. TYPE WELL
 Cable Rotary
 Other Mud

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Overburden		0	2	2
Fine sands		2	8	6
Cobbles & fine sands		8	14	6
Hard green rock		14	16	2
Multi-colored hard rock chips		16	48	32
Hard rock multi-colored		48	53	5
Broken rock clay seams		53	58	5
Hard clay		58	59	1
Rock chips mixed with brown clay		59	71	12
Rock		71	72	1
Clay firm brown multi-colored rock chips		72	79	7
Hard rock with clay seams		79	83	4
Hard rock		83	87	4
Mixed rock & clay		87	94	7
Hard rock		94	95	1
Clay & rock mixed multi-colored		95	117	22
Medium hard gray & reddish rock		117	191	74
Reddish rock with gray mixed		191	199	8
T.D. 199 ft.				

FEB 27 10 44 AM '91 STATE ENGINEERS

8. WELL CONSTRUCTION
 Diameter 8 1/2 inches Total depth 195 feet
 _____ inches
 _____ inches
 Casing record 4" PVC Sch 40
 Weight per foot _____ Thickness _____
 Diameter From To
4 inches +1 1/2 feet 195 feet
 _____ inches _____ feet _____ feet
 Surface seal: Yes No Type neat cement
 Depth of seal 52 feet
 Gravel packed: Yes No
 Gravel packed from _____ feet to 195 feet

Perforations:
 Type perforation saw cut
 Size perforation 1/16 inch
 From 55 feet to 190 feet
 From _____ feet to _____ feet

Date started 2/12/91, 19____
 Date completed 2/14/91, 19____

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump
Flushed with water			
Air-lift for 2 hours			

BAILER TEST

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

9. WATER LEVEL
 Static water level 36 after air-lift feet below land surface
 Flow 30+ G.P.M. _____ P.S.I.
 Water temperature cool °F Quality _____

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
 Contractor
 Address 625 Spice Islands Dr Suite L Sparks
 Contractor 89431
 Nevada contractor's license number 15291
 issued by the State Contractor's Board
 Nevada contractor's driller's number 1132
 issued by the Division of Water Resources
 Nevada driller's license number issued by the 1132
 Division of Water Resources, the on-site driller
 Signed Roger M. Thrall
 By driller performing actual drilling on site or contractor
 Date Roger M. Thrall 2/15/91