

OFFICE USE ONLY
 Log No. 38852
 Permit No. _____
 Basin 99
 NOTICE OF INTENT NO. 15379

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

WELL DRILLER'S REPORT
 Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

1. OWNER Red Rock Fire Dept ADDRESS AT WELL LOCATION 16180 Red Rock Road
 MAILING ADDRESS 6180 N RR Road WASHOE CNTY
RENO, NV 89506
 2. LOCATION SE 1/4 NE 1/4 Sec. 9 T 23 N 18 E WASHOE County
 PERMIT NO. _____ MA LOT 174 RANCHO HAVEN Subdivision Name
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	Thickness
<u>BLDGS. SAND, GRVL</u>		<u>0</u>	<u>36</u>	<u>36</u>
<u>MOSTLY DG</u>				
<u>DG, GRVL, SAND</u>	<u>X</u>	<u>36</u>	<u>248</u>	<u>212</u>
<u>COBBLES</u>				
<u>SOLID GRANODIORITE</u>	<u>X</u>	<u>248</u>	<u>257</u>	<u>9</u>

'92 MAR -5 P 4:14
 STATE ENGINEERS OFFICE

8. WELL CONSTRUCTION
 Depth Drilled 257 Feet Depth Cased 257 Feet
 HOLE DIAMETER (BIT SIZE)
 From 12 1/4 Inches To 0 Feet 257 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>8 7/8</u>		<u>.188</u>	<u>+2</u>	<u>257</u>

Perforations:
 Type perforation SAWCUT
 Size perforation 3/32 x 2'
 From 177 feet to 257 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 101 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 99 feet to 257 feet

9. WATER LEVEL
 Static water level 6 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature COLD °F Quality _____

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.

Date started 2/17, 1992
 Date completed 2/27, 1992

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	<u>30</u>	<u>UNKNOWN</u>	<u>7 1/2</u>

Name NEVADA DRILLING, INC. Contractor
 Address Box 21548 Contractor
CC, NV 89721
 Nevada contractor's license number issued by the State Contractor's Board 13697A
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1539
 Signed Joe Leisek
By driller performing actual drilling on site or contractor
 Date 3/5/92