

OFFICE USE ONLY
 Log No. 44838
 Permit No. _____
 Basin G-085

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

NOTICE OF INTENT NO. 24973

1. OWNER Doug Bailey ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS 3995 Riverhaven 2580 Rio Seco
Reno, Nv Reno, Nv
 2. LOCATION NW 1/4 NW 1/4 Sec. 29 T 21 N R 21 F Washoe County
 PERMIT NO. N/A 076-380-63 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
Redish volc rock		0	14	
Black " "		14	60	
Redish " "		60	64	
Black " "		64	98	
Light Brown Clay		98	159	
Black Volc Rock		159	166	
Brown Claystone		166	325	
Black & Red Volc Rock		325	570	
Brown Claystone		570	575	
Multi-colored Volc Rock		575	640	

8. WELL CONSTRUCTION
 Depth Drilled 640 Feet Depth Cased 640 Feet
 HOLE DIAMETER (BIT SIZE)
 From To
9 7/8 Inches 0 Feet 640 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 5/8</u>	<u>13</u>	<u>.188</u>	<u>-1</u>	<u>640</u>

Perforations:
 Type perforation Mill Slot
 Size perforation 1/8" x 3"
 From 500 feet to 640 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 50+ Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 55 feet to 640 feet

9. WATER LEVEL
 Static water level 449 feet below land surface
 Artesian flow none G.P.M. none P.S.I.
 Water temperature cool °F Quality good

Date started 1-28-94 19____
 Date completed 2-5-94 19____

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			
Approx	<u>18</u>	<u>620</u>	<u>4</u>

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name EMDICO Drilling Contractor
 Address P.O. Box 8056 Contractor
Reno, NV 89507
 Nevada contractor's license number issued by the State Contractor's Board 32166
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1418
 Signed Bruce Miller By driller performing actual drilling on site or contractor
 Date 2-20-94