

OFFICE USE ONLY
 Log No. 46635
 Permit No. _____
 Basin 099

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. 24979

1. OWNER Theron Jones ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS 14450 Chariot Rd. 14450 Chariot Rd.
Reno, NV Reno, NV
 2. LOCATION NE SE 1/4 1/4 Sec. 23 T. 23 N S. R. 18 E. Washoe County
 PERMIT NO. N/A 078-092-08 Sierra Ranchos
Issued by Water Resources Parcel No. Subdivision Name

3. WORK PERFORMED 4. PROPOSED USE 5. WELL TYPE
 New Well Replace Recondition Domestic Irrigation Test Cable Rotary RVC
 Deepen Abandon Other _____ Municipal/Industrial Monitor Stock Air Other _____

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
<u>Decomposed Granite and Clay</u>		<u>0</u>	<u>68</u>	<u>68</u>
<u>BROWN CLAY</u>		<u>68</u>	<u>74</u>	<u>6</u>
<u>DECOMPOSED GRANITE</u>		<u>74</u>	<u>80</u>	<u>6</u>
<u>BROWN CLAY</u>		<u>80</u>	<u>158</u>	<u>78</u>
<u>DECOMPOSED GRANITE</u>	<u>XX</u>	<u>158</u>	<u>200</u>	<u>42</u>

8. WELL CONSTRUCTION
 Depth Drilled 200 Feet Depth Cased 200 Feet
 HOLE DIAMETER (BIT SIZE)
 From 9 7/8 Inches To 0 Feet 200 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>14</u>	<u>.188</u>	<u>-1</u>	<u>200</u>

Perforations:
 Type perforation Mill slot
 Size perforation 1/8" x 3"
 From 180 feet to 200 feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type: Neat Cement
 Depth of Seal 50' Cement Grout
 Placement Method: Pumped Concrete Grout
 Poured
 Gravel Packed: Yes No
 From 50 feet to 200 feet

9. WATER LEVEL
 Static water level 30 feet below land surface
 Artesian flow none G.P.M. none P.S.I.
 Water temperature cool °F Quality good

Date started 8-15-94, 19_____
 Date completed 8-18-94, 19_____

7. WELL TEST DATA

TEST METHOD:	TEST METHOD: <input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift		
	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>Estimate</u>	<u>50</u>	<u>190</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 EMDLCO DRILLING Contractor
 Address P.O. Box 8056
Reno, NV 89507 Contractor
 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 10-10-94