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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. 21591

1. OWNER S.P.P.C. ADDRESS AT WELL LOCATION North Valmy Power Generation Station
 MAILING ADDRESS P.O. Box 10100 c/o Reno office.
Reno, NV 89520-0026
 2. LOCATION NW 1/4 NW 1/4 Sec. 28 T. 35N N/S R. 43 E. Humbolt County
 PERMIT NO. M/O 832 007-351-49 Well designation LF-1
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
Brown Clay		0	20	20
Brown clay w/ sand		20	52	32
Dark gravels w/ basalt		52	60	8
Dark gravels w/ basalt		60	80	20
Dark gravels w/volcanics		80	87	7
Red Volcanics		87	101	14
Betonite 3/8" HOLE PLUG from 78ft. to 5' from surface.				

8. WELL CONSTRUCTION
 Depth Drilled 101 Feet Depth Cased 101 Feet
 HOLE DIAMETER (BIT SIZE)
 From To
6 1/8 Inches 0 Feet 101 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
2" Schedule #80 PVC			0	101

Perforations:
 Type perforation Factory
 Size perforation .020
 From 0 feet to 101 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 5' Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Sand
 Casing Packed: Yes No
 From 78 feet to 101 feet

9. WATER LEVEL
 Static water level 63.2 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature WARM °F Quality not tested

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name MacKay Pump & Geothermal, Inc.
 Address 1600 Mt. Rose Hwy.
Reno, NV 89511
 Nevada contractor's license number issued by the State Contractor's Board 23096
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1719
 Signed R. Bruce Mackay
 By driller performing actual drilling on site or contractor
 Date 1-10-'95

7. WELL TEST DATA
 TEST METHOD: Bailer Pump Air Lift
 Date started 12-22, 1994
 Date completed 12-22, 1994

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
30		