

OFFICE USE ONLY
 Log No. 4850
 Permit No. 092A
 Basin.....

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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. 27243

Consultant: _____
 1. OWNER Bruce Colton ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS P.O. Box 12 110 Alpha Butte
Pen Valley, California 95946 P.O. Box 60835 Reno 89506-9998
 2. LOCATION NW 1/4 SE 1/4 Sec. 19 T. 22 N/S R. 19 E Washoe County
 PERMIT NO. 079-362-16 Red Rock Est. #55
 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
Top Soil		0	3	3
Light Brown Sandy Clay		3	16	13
Brown Sandy Clay		16	61	45
Green Sandy Clay		61	93	32
Gray Sandy Clay		93	143	50
Brown Sandy Clay		143	188	45
Green Sandy Clay		188	243	55
Brown Sandy Clay		243	255	12
Gray Sandy Clay		255	285	30
Soft zone		285	293	8
Gray Sandy Clay		293	335	42
Soft Zone	X	335	339	4
Gray Sandy Clay		339	355	16
Soft Zone	X	355	360	5
Gray Sandy Clay		360	385	25
Soft Zone	X	385	390	5
Gray Sandy Clay		390	400	10

8. WELL CONSTRUCTION
 Depth Drilled 400 Feet Depth Cased 400 Feet
 HOLE DIAMETER (BIT SIZE)
 From To
10 Inches 0 Feet 50 Feet
8 5/8 Inches 50 Feet 400 Feet
 _____ Inches _____ Feet _____ Feet
 CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8		.188	0	400

 Perforations:
 Type perforation Factory Sawn Slot
 Size perforation 3/32 x 3 x 5 around
 From 395 feet to 375 feet
 From 360 feet to 340 feet
 From 300 feet to 280 feet
 From _____ feet to _____ 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 50 feet to 400 feet

Date started 4-25-95, 19____
 Date completed 4-26-95, 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	<u>15</u>		

9. WATER LEVEL
 Static water level 295 feet below land surface
 Artesian flow _____ G.P.M. 15 P.S.I.
 Water temperature cold °F Quality clear

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Wayne Drilling Inc. Contractor
 Address P.O. Box 12370 Contractor
Reno, Nevada 89510
 Nevada contractor's license number issued by the State Contractor's Board 22549
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 923
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date April 28, 1995

'95 MAY -5 AM 11
 WAYNE ENGINEERS OFFICE