

OFFICE USE ONLY
 Log No. 73443
 Permit No. 92A
 Basin 92A

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. 37890

1. OWNER TOM & BARBRA JUDD ADDRESS AT WELL LOCATION Same
 MAILING ADDRESS 11400 Vicksburg Road
Reno, Nevada 89506
 2. LOCATION NW 1/4 SE 1/4 Sec. 24 T 21N N/S R 18 E Washoe County
 PERMIT NO. 086-223-06 Silver Knolls
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
WELL DEEPENING:				
8" well, Static water level @149 ft. Yield 1 1/2 GPM Total depth 210 ft.				
Tan & brown clay		210	221	11
Decomposed granite sand	X	221	224	3
Tan & brown clay		224	233	9
Decomposed granite sand	X	233	239	6
Tan clay		239	245	6
Decomposed granite sand	X	245	246	1
Tan clay		246	251	5
Decomposed granite sand	X	251	256	5
Tan clay		256	258	2
Sand	X	258	259	1
Clay		259	261	5
Sand	X	261	263	2
Clay		263	265	2
Sand	X	265	271	6
Clay		271	273	2

8. WELL CONSTRUCTION
 Depth Drilled 210 Feet Depth Cased 273 Feet
 HOLE DIAMETER (BIT SIZE)
 From 8 Inches To 210 Feet 273 Feet
 _____ Inches _____ Feet _____ 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	273

Perforations:
 Type perforation factory sawed slot
 Size perforation 3/32 x 3 x 5 around
 From 210 feet to 270 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout
 Depth of Seal deepening
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From 200 feet to 273 feet

9. WATER LEVEL
 Static water level 154 feet below land surface
 Artesian flow _____ G.P.M. 21 P.S.I.
 Water temperature cold °F Quality clear

Date started 9-21-98, 19____
 Date completed 9-23-98, 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>21</u>		

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 0022549
 issued by the State Contractor's Board
 Nevada driller's license number issued by the 908
 Division of Water Resources, the on-site driller
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date September 25, 1998