

STATE OF NEVADA
 DIVISION OF WATER RESOURCES
WELL DRILLER'S REPORT

OFFICE USE ONLY
 73463
 Permit No. 105
 NOTICE OF INTENT NO. 39081

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

1. OWNER Robert & Krista Maylor ADDRESS AT WELL LOCATION 1358 Saratoga
 MAILING ADDRESS 1358 Saratoga
Minden, NV 894

2. LOCATION NE 1/4 SE 1/4 Sec. 28 T 14N N/S R 20E E Douglas County
 PERMIT NO. 21-061-12 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
Light Gray Clay		75	95	20
Gray clay w/some clay stone		95	105	10
Gray clay		105	115	10
Gray & white clay stone		115	125	10
Frac. granite		125	135	10
Brn & White clay stone		135	145	10
Multi colored granite		145	170	25
Gray clay w/ granite		170	185	15
Frac. granite		185	200	15
Gran sandy clay stone balls	x	200	220	20

8. WELL CONSTRUCTION
 Depth Drilled 220 Feet Depth Cased 220 Feet

HOLE DIAMETER (BIT SIZE)
 From 7 7/8 Inches 75 Feet 220 Feet
 To _____ 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	12.92	.220	60	220

Perforations:
 Type perforation Factory
 Size perforation 3/32 x 3"

From 200 feet to 220 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout

Placement Method: Pumped Poured

Gravel Packed: Yes No
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level 40 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 Bruce MacKay Pump & Well Service, Inc. Contractor
 Address 1600 Mt. Rose Hwy Contractor
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 9-2-98

Date started 8/27/98, 19____
 Date completed 8/28/98, 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>20</u>		<u>2 hr.</u>
	<u>23</u>	<u>36</u>	<u>1 hr.</u>