

WHITE—DIVISION OF WATER RESOURCES
 CANARY—CLIENT'S COPY
 PINK—WELL DRILLER'S COPY

STATE OF NEVADA
 DIVISION OF WATER RESOURCES

OFFICE USE ONLY
 Log No. 79138
 Permit No. _____
 Basin _____
 NOTICE OF INTENT NO. 25038

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

1. OWNER ROBERT LUCE ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS 3562 Sunnybrook Court Calle de la plata
Sparks, NV 89436
 2. LOCATION SE 1/4 SE 1/4 Sec 16, T. 21N N/S R. 21E E Washoe County
 PERMIT NO. 6136 Issued by Water Resources Parcel No. 076-690-66 Spanish Springs Valley Ranches
 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
Soft Decomposed Granite		0	10	
Soft Granite		10	70	
Soft granite, tan clay		70	93	
Soft granite		93	240	
Granite		240	275	
Granite		275	300	
Granite		300	463	
Fracture		463	464	
Granite		464	500	

Well destroyed per Fritz's instructions, from Washoe County Environmental Health
 Our crew introduced gravity 100 cubic feet of cuttings in the hole from 500' to the surface.
 There was no water present in this bore

8. WELL CONSTRUCTION
 Depth Drilled 500 Feet Depth Cased 0 Feet
 HOLE DIAMETER (BIT SIZE)
 From To
8 Inches 0 Feet 300 Feet
6 Inches 300 Feet 500 Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
		NONE		

Perforations:
 Type perforation N/A
 Size perforation N/A
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type:
 Depth of Seal 0 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level 0 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Diamond Well Drilling Co.
 Address 1660 Old Airport Road
Auburn, CA 95602
 Nevada contractor's license number 0034841
 issued by the State Contractor's Board
 Nevada driller's license number 1975
 issued by the Division of Water Resources, the on site driller
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date _____

Date started 5/14/98, 19_____
 Date completed 5/18/98, 19_____

7. WELL TEST DATA

TEST METHOD: <input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift			
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)	