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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. 41929

1. OWNER Andrze J & Teresa BupaJsk ADDRESS AT WELL LOCATION Not Yet Given
 MAILING ADDRESS 5757 Ethel Way Carson City NV 89702 APN# 007-051-23
 2. LOCATION SW 1/4 SE 34 T 15 R 19 E CARSON County
 PERMIT NO. 007-051-23 Issued by Water Resources Parcel No. Clear Creek 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
<u>overburden</u>		<u>0</u>	<u>4</u>	<u>4</u>
<u>Coarse D&Sands</u>		<u>4</u>	<u>110</u>	<u>106</u>
<u>Fine and soft D&Sands</u>		<u>110</u>	<u>190</u>	<u>80</u>
<u>Very soft D&Sands</u> <u>Clayey facies</u>	<u>1'</u>	<u>190</u>	<u>205</u>	<u>15</u>
<u>Large fractured</u> <u>D&G Granite</u>	<u>XX</u>	<u>205</u>	<u>240</u>	<u>35</u>

8. WELL CONSTRUCTION
 Depth Drilled 240 Feet Depth Cased 240 Feet
 HOLE DIAMETER (BIT SIZE)
 From 10 3/4 Inches To 0 Feet 240 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet
 CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 5/8</u>	<u>13.03</u>	<u>.188</u>	<u>0</u>	<u>240</u>

Perforations:
 Type perforation Mill Slot
 Size perforation 3 x 3/32
 From 220 feet to 240 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout
 Depth of Seal 70
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From 70 feet to 240 feet

9. WATER LEVEL
 Static water level 170 feet below land surface
 Artesian flow _____ G.P.M. 34 P.S.I.
 Water temperature Cold °F Quality Good

Date started 3-26, 1900
 Date completed 3-28, 1900

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>34</u>	<u>15</u>	<u>3 HRS</u>

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Capital City Well Drilling Contractor
 Address 20 Kit Kat DR Contractor
Carson City NV 89706
 Nevada contractor's license number issued by the State Contractor's Board 41775
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1905
 Signed Michael J. Black
 By driller performing actual drilling on site or contractor
 Date 3-28-00