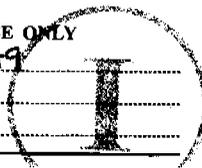


Log No. 88249

Permit No. _____

Basin 176



NOTICE OF INTENT NO. 10332

PRINT OR TYPE ONLY RV-1
 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 U.S. Geological Survey ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS 333 W. Nye Lane _____
Carson City, NV 89706 _____

2. LOCATION NW 1/4 NE 1/4 Sec. 29 T. 25 N/S R. 58 E. White Pine County
 PERMIT NO. M/O 1254 7-120-01 _____
 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	Thick-ness
sand and gravel		0	123	123
sand and clay	x	123	273	150
Weathered carbonate rock w/ clay-filled fractures		273	290	17
Unweathered carbonate rock	x	290	350	60
<u>Dual Completion</u>				

8. WELL CONSTRUCTION
 Depth Drilled 350 Feet Depth Cased 150/350 Feet

HOLE DIAMETER (BIT SIZE)
 From To
7 7/8 Inches 0 Feet 311 Feet
6 1/2 Inches 311 Feet 350 Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
2.0	PVC	Sched 80	0	150
2.0	PVC	Sched 80	0	350

Perforations: Mill slot
 Type perforation _____
 Size perforation 0.02

From 135 feet to 145 feet
 From 335 feet to 345 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 316-187, 125-0 _____
 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
x bentonite
 Gravel Packed: Yes No grout
 From 350-316 feet to 187-125 feet

9. WATER LEVEL 130
 Static water level shallow-129, deep- feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started 07-09-02 19_____
 Date completed 07-12-02 19_____

7. WELL TEST DATA

TEST METHOD:	TEST METHOD: <input type="checkbox"/> Bailer <input checked="" type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift		
	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
shallow	1.5	1.8	2 - pump
deep	5	-	2 - air lift

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.

Name David L. Berger Contractor
 Address USGS 333 W. Nye Lane Contractor
Carson City, NV 89706

Nevada contractor's license number issued by the State Contractor's Board _____
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller: FP-1518

Signed David L. Berger
 By driller performing actual drilling on site or contractor
 Date 8-8-02

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 02 AUG -8 PM 2:39
 STATE ENGINEERS OFFICE