

OFFICE USE ONLY
 Log No. 88797
 Permit No. _____
 Basin DS7

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. 1025 16

1. OWNER William L. Taylor ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS 4936 W. Highway 124 Reno NV 775 161123
 2. LOCATION 5th 1/4 Sec 18 T 19 N3 R 19 E 1625 h.c. County _____
 PERMIT NO. WEL 505926 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
<u>Red base</u>		<u>0</u>	<u>1</u>	<u>1</u>
<u>Clay</u>		<u>1</u>	<u>10</u>	<u>9</u>
<u>Sand Layer & Gravel</u>		<u>10</u>	<u>12</u>	<u>2</u>
<u>Clay & Cobble</u>		<u>12</u>	<u>14</u>	<u>2</u>
<u>Gravel & Iron Sand</u>	<u>Yes</u>	<u>14</u>	<u>25</u>	<u>11</u>
<u>Clay</u>		<u>25</u>	<u>26</u>	<u>1</u>

8. WELL CONSTRUCTION
 Depth Drilled 26 Feet Depth Cased 25 Feet
 HOLE DIAMETER (BIT SIZE)
 From 6 Inches To 0 Feet 26 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>2</u>		<u>5/16</u>	<u>0</u>	<u>25</u>

Perforations:
 Type perforation Slotted
 Size perforation 1/2"
 From 10 feet to 12 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout
 Depth of Seal 3
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From 3 feet to 25 feet

9. WATER LEVEL
 Static water level 14 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started 3/16 2005
 Date completed 3/16 2005

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 type="checkbox"/> 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 Thomas L. Campbell Contractor
 Address 305 E. Camp Truck Contractor
Chandler AZ
 Nevada contractor's license number issued by the State Contractor's Board CB57905
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1677
 Signed J.P. [Signature]
 By driller performing actual drilling on site or contractor
 Date 3/16/05