

PRINT OR TYPE ONLY
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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

Log No. 101368
 Permit No. _____
 Basin 108

NOTICE OF INTENT NO. 58140

1. OWNER Bruce Tilden ADDRESS AT WELL LOCATION 11 Hall Dr. Yerington Nev 89447
 MAILING ADDRESS PO Box 921 Yerington Nev 89447
 2. LOCATION SE 1/4 SE 1/4 Sec 16 T. 14 N/S R. 25 E County Esmeralda
 PERMIT NO. 014-23114 Parcel No. _____ Subdivision Name Peoples Block

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>Sand + clay</u>		<u>100</u>	<u>110</u>	<u>10</u>
<u>Coarse gravel</u>	<input checked="" type="checkbox"/>	<u>110</u>	<u>120</u>	<u>10</u>
<u>clay + fine gravel</u>		<u>120</u>	<u>123</u>	<u>3</u>
<u>Coarse gravel</u>	<input checked="" type="checkbox"/>	<u>123</u>	<u>140</u>	<u>17</u>
<u>clay fine gravel</u>	<input checked="" type="checkbox"/>	<u>140</u>	<u>150</u>	<u>10</u>

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

HOLE DIAMETER (BIT SIZE)

Inches	Feet	From	To
<u>4 1/2</u>	<u>90</u>	<u>0</u>	<u>150</u>

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6</u>		<u>1 1/8</u>	<u>0</u>	<u>100</u>
<u>4 1/2</u>		<u>F 4 80</u>	<u>90</u>	<u>150</u>

Perforations:
 Type perforation Hardy saw slott
 Size perforation 3/32 x 3
 From 110 feet to 150 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

Depth of Seal 50
 Placement Method: Pumped Poured

Gravel Packed: Yes No
 From 100 feet to 150 feet

9. WATER LEVEL
 Static water level 30 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature cool °F Quality good

Date started July 7, 2006
 Date completed July 10, 2006

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input checked="" type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	<u>20</u>	<u>10</u>	<u>3</u>

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Edmund Miths Drilling Contractor
 Address PO Box 92 Yerington Nev. Contractor
 Nevada contractor's license number 32166A issued by the State Contractor's Board
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 718
 Signed Edmund Miths By driller performing actual drilling on site or contractor
 Date July 11 - 06

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