

Log No. 101421  
 Permit No. \_\_\_\_\_  
 Basin 10?

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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. 56756

1. OWNER Leon Sittman ADDRESS AT WELL LOCATION 1850 Antelope  
 MAILING ADDRESS \_\_\_\_\_  
 2. LOCATION SW 1/4 NE 1/4 Sec 20 T. 17 N/S R. 25 E County YO  
 PERMIT NO. 017-432-12 Parcel No. \_\_\_\_\_ Subdivision Name \_\_\_\_\_  
 Issued by Water Resources \_\_\_\_\_

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</u>		<u>0</u>	<u>6</u>	<u>6</u>
<u>Sand &amp; Gravel</u>		<u>6</u>	<u>78</u>	<u>72</u>
<u>Brown clay &amp; gravel</u>		<u>78</u>	<u>115</u>	<u>37</u>
<u>Small Gravel</u>		<u>115</u>	<u>135</u>	<u>20</u>
<u>Small and Big Gravel</u>		<u>135</u>	<u>160</u>	<u>25</u>

8. WELL CONSTRUCTION  
 Depth Drilled 160 Feet Depth Cased 160 Feet  
 HOLE DIAMETER (BIT SIZE)  
 From 0 To 160  
11 Inches \_\_\_\_\_ Feet \_\_\_\_\_  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 5/8</u>	<u>12</u>	<u>.188</u>	<u>+1</u>	<u>20</u>
<u>6 5/8</u>	<u>4</u>	<u>SDR 21</u>	<u>20</u>	<u>160</u>

Perforations:  
 Type perforation Grinder cut  
 Size perforation 1 1/2 inch  
 From 140 feet to 160 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  
 Depth of Seal 55  Neat Cement  
 Placement Method:  Pumped  Cement Grout  
 Poured  Concrete Grout  
 Gravel Packed:  Yes  No  
 From 65 feet to 160 feet

9. WATER LEVEL  
 Static water level 46 feet below land surface  
 Artesian flow 114 G.P.M. 25 P.S.I.  
 Water temperature Cold F Quality Clear

Date started 12-22, 2005  
 Date completed 12-22, 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 checked="" type="checkbox"/> Air Lift	<u>2.5</u>		<u>1.5</u>

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.  
 Name BLAIN DRILLING & PUMP CO. INC.  
 Address P.O. Box 1255 Carson City, NV 89702  
 Nevada contractor's license number issued by the State Contractor's Board 46497  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2134-T1  
 Signed [Signature] By driller performing actual drilling on site or contractor  
 Date 12-25-05

STATE ENGINEERING OFFICE

2005 JUN 18 PM 2:28 APR - 5 PM 4:05

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