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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. _____
 Permit No. _____
 Basin 103

NOTICE OF INTENT NO. 59900

1. OWNER Art Wilson Co
 MAILING ADDRESS _____
 2. LOCATION NW 1/4 NE 1/4 Sec 25 T 16
 PERMIT NO. W-618/75475, 016-057-024
Issued by Water Resources Parcel No.

ADDRESS AT WELL LOCATION
145 Linchan Road
MOUND HOUSE, NV 89706
 N/S R 2D E Lyon Co County
 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 well

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Broken up rock		15	64	
Red clay		69	71	
Volcanic				
Broken volcanic		71	77	
Red clay				
Broken lime stone		77	270	
HARD lime stone		270	600	
with fractures				

8. WELL CONSTRUCTION

Depth Drilled 600 Feet Depth Cased 600 Feet

HOLE DIAMETER (BIT SIZE)

From	To
14 Inches	0 Feet 160 Feet
9 1/8 Inches	160 Feet 600 Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
10		188	72	160
8		180	140	600

Perforations:
 Type perforation factory
 Size perforation 1 1/2" x 1/2"
 From 980 feet to 600 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout

Depth of Seal 100
 Placement Method: Pumped Poured
 Poured

Gravel Packed: Yes No
 From 160 feet to 100 feet

9. WATER LEVEL
 Static water level 75 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature 70 °F Quality _____

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Leach Drilling Inc Contractor
 Address PO Box 399 Contractor
Silver Springs, NV 89429
 Nevada contractor's license number issued by the State Contractor's Board 31841
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2275
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date 11-28-04

Date started 10-30, 2004
 Date completed 11-29, 2004

7. WELL TEST DATA

TEST METHOD: Bailor Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>150</u>	<u>15</u>	<u>15</u>