

STATE OF NEVADA
DIVISION OF WATER RESOURCES
WELL DRILLER'S REPORT

OFFICE USE ONLY
Log No. 105735
Permit No. _____
Basin 064

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

Please complete this form in its entirety in
accordance with NRS 534.170 and NAC 534.340

1900 NOTICE OF INTENT NO. 59634

1. OWNER Josh Smith ADDRESS AT WELL LOCATION 1390 Allen Rd Battle MTN NV 89820
MAILING ADDRESS BATTLE MTN NV 89820 Subdivision Name: _____ County: LANDON

2. LOCATION SE 1/4 SE 1/4 Sec 10 T 32 N/S R 44 E Latitude 40.657886 UTM E 500080 NAD 27
PERMIT/WAIVER No. 010-270-25 Longitude 116.999054 N 4500569 NAD 83/WGS 84

3. WORKED PERFORMED
 New Well Replace Recondition
 Deepen Other

4. PROPOSED USE
 Domestic Irrigation Test Monitor
 Municipal/Industrial Stock

5. WELL TYPE
 Rotary Cable Air RVC Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
TOP SOIL		0	5	5
COLLECHIR CLAY		5	20	15
SANDY BROWN CLAY		20	50	30
LIGHT GREEN CLAY		50	100	50
SAND + GRAVEL		100	120	20
SANDY GREEN CLAY		120	160	40
SANDY GRAVEL GREEN CLAY		160	180	20
SAND + GRAVEL		180	200	20

9. WELL CONSTRUCTION

Depth Drilled 200 Feet Depth Cased 200 Feet

HOLE DIAMETER (BIT SIZE)
10 5/8
Inches 0 From 0 To 200 Feet
Inches _____ Feet _____ Feet
Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 3/8</u>		<u>.189</u>	<u>71</u>	<u>200</u>

Perforations:
Type of perforation Touch Cut
Size of perforation 3/6 x 3

From 140 feet to 200 feet
From _____ feet to _____ feet

Annular Seal: Yes No

Neat Cement to _____ Pumped Poured
 Cement Grout 5 to 60 Pumped Poured
 Concrete Grout to _____ Pumped Poured
 80% Bentonite Grout to _____ Pumped Poured

Gravel Pack: Yes No 120 to 200 Pumped Poured
Type: _____

Bentonite Chips: Yes No 60 to 120 Pumped Poured
Type: _____

7. Water Level
Static water level: 65 feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: Cold °F
Quality: Good

8. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>50+</u>	<u>UNK</u>	<u>3 Hrs.</u>

10. DRILLER'S CERTIFICATION

This well was drilled under my supervision and the report is true to the best of my knowledge.

Name L. B. Drilling Co.
Address P.O. Box 902
Wmca NV 89446

Nevada contractor's license number 9605A
issued by the State Contractor's Board

Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1807

Signed [Signature]
By driller performing actual drilling on site of contractor

Date 11-20-01

USE ADDITIONAL SHEETS IF NECESSARY