

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

Log No. _____
 Permit No. _____
 Basin. **207**

NOTICE OF INTENT NO. **59936**

1. OWNER **Joseph & Patti Christensen** ADDRESS AT WELL LOCATION **265 N 100 E**
 MAILING ADDRESS **Po Box 243** **NAD 27 N 38° 51' 49.7" lot 7 blk 12**
Land NV 89317 **W 112° 00' 17.3"**

2. LOCATION **NW 1/4 NE 1/4 Sec. 33 T. 12 N/S R. 62 E. White Pine County**
 PERMIT NO. **N/A** **06-015-11** **Land town site**
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	Thickness
Silty loam topsoil		0	4	
gravel cobbles		4	9	
cemented gravel		9	21	
clay gravel conglomerate		21	42	
Silty clay		42	49	
clay gravel con.		49	60	
gravel	water	60	60.5	.5
clay gravel con.		60.5	74.5	
gravel	water	74.5	75	.5
clay		75	77	
clay gravel con	water	77	85	
clay		85	88	
gravel	water	88	95	
clay		95	98	
gravel	water	98	99	
clay		99	104	
gravel	water	104	109	
clay		109	120	
gravel	water	120	124	
clay		124	130	

8. WELL CONSTRUCTION
 Depth Drilled **130** Feet Depth Cased **130** Feet

HOLE DIAMETER (BIT SIZE)

	From	To
10 Inches	0	50
8 Inches	50	130

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 3/8	12.9	.188	7	130

Perforations:
 Type perforation **mill**
 Size perforation **1/8 x 2.5 x 6 Row**

From **80** feet to **100** feet
 From **110** feet to **130** feet

Surface Seal: Yes No Seal Type:
 Depth of Seal **50'** Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout

Gravel Packed: Yes No
 From **50** feet to **130** feet

Date started **Oct 2008**
 Date completed **Feb 4 2009**

7. WELL TEST DATA

TEST METHOD: Bailor Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
30	6'	1 hr

9. WATER LEVEL
 Static water level **54** feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature **60.1** °F Quality **good**

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.

Name **Maynard Well Drilling** Contractor
 Address **Po Box 64 Land NV 89317** Contractor

Nevada contractor's license number issued by the State Contractor's Board **047226**
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1584**

Signed **Chris Maynard**
 By driller performing actual drilling on site or contractor
 Date **Feb 10 - 09**