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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. 68400

1. OWNER Royal L Cooks of America ADDRESS AT WELL LOCATION 860 N 1st west
 MAILING ADDRESS Po Box 150308 N 38° 53.188' W 115° 00.543' Wgs 84
Ely, NV 89315
 2. LOCATION NW 1/4 SE 1/4 Sec 21 T 12 N/S R 62 E White Pine County
 PERMIT NO. N/A 013-088-105 Subdivision Name Sawmill Estates
Issued by Water Resources Parcel No.

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
Silty top Soil		0	2.5	
gravel-cobbles		2.5	8	
clay		8	12	
gravel-cobbles		12	17	
clay		17	18	
gravel-cobbles-clay		18	70	
Silty clay		70	93	
gravel		93	94	
Silty clay		94	110	
Sand	water	110	111	
Silty clay		111	135	
gravel	water	135	140	
clay		140	144.5	
gravel	water	144.5	146	
gravel	water	146	150	
clay		150	155	
gravel	water	155	160	

8. WELL CONSTRUCTION
 Depth Drilled 160 Feet Depth Cased 160 Feet
 HOLE DIAMETER (BIT SIZE)
 From 10 Inches To 160 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet
 CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6.75</u>	<u>13.9</u>	<u>.188</u>	<u>-18"</u>	<u>160'</u>

 Perforations:
 Type perforation milk
 Size perforation 1/8" x 2.5" x 6 row
 From _____ feet to _____ feet
 From 110 feet to 130 feet
 From 140 feet to 160 feet
 From _____ feet to _____ 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 55 feet to 160 feet

9. WATER LEVEL
 Static water level 99.5 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature cold °F Quality good

Date started February 27, 2015
 Date completed March 19, 2015

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input checked="" type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift	<u>30</u>	<u>9</u>	<u>1 hr</u>

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 247224
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1556
 Signed Oran Maynard
By driller performing actual drilling on site or contractor
 Date March 24 - 2015