

OFFICE USE ONLY
 Log No. 13101
 Permit No. _____
 Basin Eagle

WELL DRILLERS REPORT

Please complete this form in its entirety

1. OWNER Millard Realty ADDRESS Carson City Nv.

2. LOCATION 1/4 1/4 Sec T N/S R E Carson City County
 PERMIT NO. NW 1/4, NE 1/4, NW 1/4, NE 1/4, Sec. 28, T 15 N, R 20 E.

3. TYPE OF WORK
 New Well Recondition
 Deepen Other
 4. PROPOSED USE
 Domestic Irrigation Test
 Municipal Industrial Stock
 5. TYPE WELL
 Cable Rotary
 Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Sandy Clay & Rock		0	91	91
Clay & Rock		91	195	104
Rock		195	197	2
Sandy Clay & Rock	***	197	205	8
Sand & Rock	X	205	211	6
Sandy Clay & Rock		211	235	24
Sand & Rock		235	245	10
Sandy Clay & Rock		245	255	10
Sand & Rock	X	255	256	1
Clay & Rock		256	261	5
Sand & Rock	X	261	262	1
Clay & Rock		262	265	3
Sand & Rock	X	265	266	1
Clay & Rock		266	268	2
Sand & Rock	X	----	----	----

8. WELL CONSTRUCTION
 Diameter hole 6 5/8 inches Total depth 268 feet
 Casing record.
 Weight per foot 12.98 Thickness 188

Diameter	From	To
<u>8 5/8</u> inches	<u>0</u> feet	<u>141</u> feet
<u>6 5/8</u> inches	<u>0</u> feet	<u>268</u> feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet

 Surface seal: Yes No Type Grout
 Depth of seal 50 feet
 Gravel packed: Yes No
 Gravel packed from _____ feet to _____ feet
 Perforations:
 Type perforation Mill Slot
 Size perforation 3/32 X 3"
 From 184 feet to 268 feet
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level 185 Feet below land surface 185
 Flow None G.P.M.
 Water temperature Cold ° F. Quality Good

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

Name Burgess & Reho Well Drilling Co.

Address 3320 Conte Dr., Carson City.

Nevada contractor's license number _____

Nevada driller's license number 699

Signed [Signature]

Date 5-11-73

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump
Developed with Compressed Air			
Approx. 10 Gals Per Minute			

BAILER TEST

G.P.M. None Draw down _____ feet _____ hours
 G.P.M. _____ Draw down _____ feet _____ hours
 G.P.M. _____ Draw down _____ feet _____ hours