

WELL DRILLERS REPORT

Please complete this form in its entirety

NOTICE OF INTENT NO. NO CARD

PRINT OR TYPE ONLY

1. OWNER Shorty Nowlin Nowlin const. ADDRESS AT WELL LOCATION 1565 Shirley Minden, Nev (Johnson Ln)
 MAILING ADDRESS P.O. Box 2158 Sand W. 89410

2. LOCATION $\frac{1}{4}$ Sec. 34 T. 14 N/S R. 20 E Douglas County
 PERMIT NO. _____ Parcel No. Johnson Lane Subdivision Name

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
sand & clay		0	21	
sand		21	24	
sand & clay		24	50	
sand & silt		50	99	
sand & clay	XX	99	114	
sand	XX	114	140	
clay		114	157	
sand & clay		157	173	

8. WELL CONSTRUCTION

Diameter hole 6" inches Total depth 173' feet
 Casing record _____
 Weight per foot _____ Thickness 188 _____

Diameter	From	To
<u>6"</u> inches	<u>0</u> feet	<u>173'</u> feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet

Surface seal: Yes No Type cement
 Depth of seal 50' feet
 Gravel packed: Yes No
 Gravel packed from _____ feet to _____ feet

Perforations:
 Type perforation Factory
 Size perforation 3x5/32
 From 158 feet to 169 feet
 From _____ feet to _____ feet

9. WATER LEVEL

Static water level 96' feet below land surface
 Flow _____ G.P.M. _____ P.S.I.
 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 Kawchack Drilling Inc. Contractor
 Address 1373 Judy st. Minden, Nev. 89423 Contractor
 Nevada contractor's license number 021268
 Nevada contractor's drillers number 1380
 Nevada driller's license number 1380
 Signed Edle J Kawchack Actual Driller
 Contractor
 Date 4/19/84

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump

BAILER TEST

G.P.M. 15 Draw down 0 feet one hours
 G.P.M. _____ Draw down _____ feet _____ hours
 G.P.M. _____ Draw down _____ feet _____ hours