

WELL DRILLERS REPORT

Please complete this form in its entirety

PRINT OR TYPE ONLY

NOTICE OF INTENT NO. 4605L

1. OWNER Jim and Mary Scott ADDRESS AT WELL LOCATION 11780 Overland
 MAILING ADDRESS 11780 Overland 11780 Overland
Reno, Nv 89506 Lemon Valley, Nv
 2. LOCATION SE 1/4 NW 1/4 Sec 15 T 21 N 19 E County HEPNER
 PERMIT NO. 080-383-14 Parcel No. LOT 6 BLK 8 HEPNER #4
 Issued by Water Resources 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 Air

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
D. G. greenish		120	141	21
D. G. Chips green and blackish fractured		141	167	26
clay layer		167	170	3
hard rock fractured blue green and black with some white sand		170	196	26
T.D. 196				
8" well has 6" liner at 108' from a previous driller				
<i>ORIGINAL LOG # 17404</i>				

8. WELL CONSTRUCTION
 Diameter hole 6 1/2" inches Total depth .196 feet
 Casing record 8" & 6" & 4"
 Weight per foot 6.25 Thickness .154
 Diameter 4 1/2" inches From 96 feet To 196 feet
 Surface seal: Yes No Type _____
 Depth of seal _____ feet
 Gravel packed: Yes No
 Gravel packed from _____ feet to _____ feet
 Perforations:
 Type perforation factory
 Size perforation 3/32 X 3
 From 154 feet to 196 feet
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level 120 feet below land surface
 Flow 20 GPM + G.P.M. P.S.I.
 Water temperature cool ° F. Quality _____

Date started 9/18, 1984
 Date completed 9/18, 1984

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump
<u>Blew well for 1 hour to clean and develop</u>			

10. DRILLERS CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Aqua Drilling and Well Service, Inc. Contractor
 Address 2255 Glendale Ave Sparks, Nv 89431 Contractor
 Nevada contractor's license number 15291
 Nevada contractor's drillers number 1132
 Nevada driller's license number 1132 Actual Driller
 Signed Roger M. Thrall Contractor
 Date 9/18/84

BAILER TEST
 G.P.M. _____ Draw down _____ feet _____ hours
 G.P.M. _____ Draw down _____ feet _____ hours
 G.P.M. _____ Draw down _____ feet _____ hours