

WELL DRILLERS REPORT

Please complete this form in its entirety

NOTICE OF INTENT NO. 4302

PRINT OR TYPE ONLY

1. OWNER Eark Lacy ADDRESS AT WELL LOCATION Pilot Valley Nev
 MAILING ADDRESS Wendover Nev

2. LOCATION NW 1/4 SW 1/4 Sec. 11 T 37 N 49 E E1K0 County _____
 PERMIT NO. 167 Issued by Water Resources Parcel No. _____ 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
Top soil		0	12	12
Clay sand		12	20	8
Clay sand Gravel		20	34	14
Clay Sand		34	70	34
Clay Pea Gravel		70	80	10
Clay Sand		80	130	30
Clay Gravel	x	130	145	5
Gravel Sand	x	145	157	13
Clay Sand		157	170	13
Clay		170	175	5

8. WELL CONSTRUCTION
 Diameter hole 6 3/4 inches Total depth 175 feet
 Casing record _____
 Weight per foot _____ Thickness 0.156

Diameter	From	To
<u>6</u> inches	<u>0</u> feet	<u>175</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 feet
 Gravel packed: Yes No
 Gravel packed from 50 feet to 175 feet
 Perforations:
 Type perforation Factory
 Size perforation 1/8 x 4
 From 25 feet to 175 feet
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level 30 feet below land surface
 Flow _____ G.P.M. _____ P.S.I.
 Water temperature edd ° 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 AAA Drilling Contractor
 Address Box 470 Panaca Nev Contractor
 Nevada contractor's license number 20684
 Nevada contractor's drillers number 904
 Nevada driller's license number 1438
 Signed C.M. Robinson Jr. Shane Bennett Actual Driller Contractor
 Date 1-14-85

7. WELL TEST DATA

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

BAILER TEST
 G.P.M. 30 Draw down 20 feet 1 hours
 G.P.M. _____ Draw down _____ feet _____ hours
 G.P.M. _____ Draw down _____ feet _____ hours