



WELL DRILLER'S REPORT

Please complete this form in its entirety

NOTICE OF INTENT NO. _____

PRINT OR TYPE ONLY

1. OWNER CONNECTICUT GENERAL LIFE (INA) ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS 90 Doane Western Co.
125 E. Plumb Ln. Suite 145 Reno NV 89502
 2. LOCATION S.W. 1/4 NW 1/4 Sec. 27 T. 44 N. R. 31 E. HUMBOLDT County _____
 PERMIT NO. 46723 Issued by Water Resources Parcel No. _____ Subdivision Name _____

3. TYPE OF WORK	4. PROPOSED USE	5. TYPE WELL
New Well <input checked="" type="checkbox"/> Recondition <input type="checkbox"/>	Domestic <input type="checkbox"/> Irrigation <input checked="" type="checkbox"/> Test <input type="checkbox"/>	Cable <input type="checkbox"/> Rotary <input type="checkbox"/>
Deepen <input type="checkbox"/> Other <input type="checkbox"/>	Municipal <input type="checkbox"/> Industrial <input type="checkbox"/> Stock <input type="checkbox"/>	Other <input checked="" type="checkbox"/>

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
T6 soil		0	5	5
Granite sand		5	80	75
Gravel		80	85	5
Gravel + sand		85	135	50
Gravel sand + clay		135	156	21
large gravel + sand		156	210	54
sand + clay		210	230	20
large rocks + clay		230	253	23
gravel + sand		253	260	7
brown clay + gravel		260	290	30
sandy clay		290	300	10
gravel + clay		300	335	35
gravel + sand		335	354	19
sand + clay		354	368	14
sand + gravel		368	392	24
sandy clay		392	420	28
Clay + Rocks		420	450	30
Plugged by well				
log # 116352				

8. WELL CONSTRUCTION

Diameter 27 inches Total depth 450 feet

Casing record _____ inches _____ inches

Weight per foot _____ Thickness 1 1/2"

Diameter	From	To
<u>16</u> inches	<u>0</u> feet	<u>450</u> feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet

Surface seal: Yes No Type concrete

Depth of seal 50 feet

Gravel packed: Yes No

Gravel packed from 50 feet to 450 feet

Perforations:

Type perforation hammer

Size perforation 1/8" x 2 1/2"

From 150 feet to 450 feet

From _____ feet to _____ feet

Date started 1-26-87, 19____
 Date completed 2-10-87, 19____

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump
	<u>3200</u>	<u>140</u>	<u>8 hrs.</u>

BAILER TEST

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

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

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

9. WATER LEVEL

Static water level 55 feet below land surface

Flow _____ G.P.M. _____ P.S.I.

Water temperature cool °F Quality Good

10. DRILLER'S CERTIFICATION

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

Name Armstrong B2167 Contractor

Address _____ Contractor

Nevada contractor's license number issued by the State Contractor's Board 5348

Nevada contractor's driller's number issued by the Division of Water Resources 1505

Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1506

Signed Robert Armstrong
 By driller performing actual drilling on site or contractor

Date 5-11-87