

OFFICE USE ONLY
 Log No. 34373
 Permit No. _____
 Basin 9-106

WELL DRILLER'S REPORT

Please complete this form in its entirety

NOTICE OF INTENT NO. 14247

PRINT OR TYPE ONLY

1. OWNER Lura Morrison ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS 1155 Hwy 395 _____
Garderville NV. _____
 2. LOCATION N.E. 1/4 SE 1/4 Sec. 1 T. 10 N/S R. 21 E. Douglas County
 PERMIT NO. _____ 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 Other
 5. TYPE WELL
 Cable Rotary
 Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Top Soil	NO	1	3	3
Brown Clay	NO	3	30	27
Brown Clay gravel	NO	30	140	110
Broken Shale	YES	140	159	19
Brown Clay	NO	159	180	21
Broken shale	YES	180	199	19
Brown Clay	NO	199	221	20
Broken Shale	YES	221	235	14
Brown Clay	NO	235	237	2

190 OUT -2 AUG 02
STATE ENGINEER OFFICE

8. WELL CONSTRUCTION
 Diameter 10" inches Total depth 200 feet
 _____ inches
 _____ inches
 Casing record 6"
 Weight per foot .16 Thickness 1.88

Diameter	From	To
<u>6"</u> inches	<u>7.1</u> feet	<u>200</u> feet
<u>5"</u> inches	<u>199'</u> feet	<u>237'</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 50 feet to 200 feet
 Perforations:
 Type perforation Fes. 100-7
 Size perforation 2/32
 From 140 feet to 160 feet
 From 180 feet to 200 feet
 From 218 feet to 228 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Date started Sept 17 1990
 Date completed Sept 20 1990

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump
	<u>15</u>	<u>By Air Lift</u>	
	<u>4 HP</u>		

BAILER TEST

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

9. WATER LEVEL
 Static water level 50 feet below land surface
 Flow _____ G.P.M. _____ P.S.I.
 Water temperature cold °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 ENDICO INC. Contractor
 Address P.O. Box 92, Smith, NV Contractor
 Nevada contractor's license number issued by the State Contractor's Board 24149
 Nevada contractor's driller's number issued by the Division of Water Resources _____
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 718T-1
 Signed JAMES D. CUMPTON By driller performing actual drilling on site or contractor
 Date 9-20-90