

OFFICE USE ONLY
 Log No. 34496
 Permit No. _____
 Basin 10-150
 NOTICE OF INTENT NO. 43624

PRINT OR TYPE ONLY

WELL DRILLER'S REPORT

Please complete this form in its entirety

1. OWNER Dick Reason ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS Rt. 2 Box 22
Round Mtn. NV 89045
 2. LOCATION N 1/2 SE 1/4 SE 1/4 Sec. 12 T 6 S R 40 E Nye County
 PERMIT NO. 31053 & 31054 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
Sandy Top Soil		0	8	8
Sand & Gravel to 5' Size		8	12	4
Sand & Gravel in Sandy Clay		12	30	18
Brown Clay w/s Gravel		30	40	10
Large Gravel in Sandy Brown Clay		40	70	30
Sandy Brown Clay w/Tight Gravel Stringers		70	95	15
Sand & Gravel	X	95	105	10
Sandy Brown Clay w/course Gravel Imbeded		105	130	25
Sandy Brown Clay		130	140	10
Brown Clay w/Gravel Imbeded		140	180	40
Sand & Gravel w/s Clay	X	180	225	45
Brown Clay w/s Gravel		225	320	95
Brown Clay w/s Sand Stringers		320	400	80

90 JUL 27 AM 10:33 STATE CONTRACTOR

8. WELL CONSTRUCTION
 Diameter 30 inches Total depth 400 feet
 _____ inches
 _____ inches
 Casing record 16"
 Weight per foot 42lbs. Thickness 250

Diameter	From	To
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet

 Surface seal: Yes No Type Grout
 Depth of seal 0-50 feet
 Gravel packed: Yes No
 Gravel packed from 50 feet to 400 feet
 Perforations:
 Type perforation Mill Slot
 Size perforation 1/8 x 3
 From _____ feet to _____ feet
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level 103 feet below land surface
 Flow _____ G.P.M. _____ P.S.I.
 Water temperature cold °F Quality good

Date started July 23, 19 90
 Date completed July 25, 19 90

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump
	<u>800</u>	<u>170'</u>	<u>8 Hrs.</u>

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Humboldt Drilling & Pump Co., Inc.
 Address P.O. Box 592 Wmca., NV 89445
 Contractor
 Nevada contractor's license number issued by the State Contractor's Board 015234
 Nevada contractor's driller's number issued by the Division of Water Resources C-23
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 795
 Signed [Signature]
 Date 7-26-90

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