

OFFICE USE ONLY
 Log No. 36633
 Permit No. _____
 Basin _____

WELL DRILLER'S REPORT

Please complete this form in its entirety

PRINT OR TYPE ONLY

NOTICE OF INTENT NO. misplaced

1. OWNER BENJAMIN COHTEE ADDRESS AT WELL LOCATION None
 MAILING ADDRESS 764 So. 5th St. #5
Elko, NV 89801
 2. LOCATION NW 1/4 NW 7 T. 34 N. S. R. 56 E. Elko County
 PERMIT NO. _____ Parcel No. Lot 21 BLKF Subdivision Name LAST CHANCE RANCH UNIT #5
Issued by Water Resources

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
<u>SOFT, sandy, clay</u>		<u>0</u>	<u>35</u>	<u>35</u>
<u>Humboldt River Clay</u>		<u>35</u>	<u>71</u>	<u>36</u>
<u>Seep</u>	<u>-</u>	<u>71</u>		<u>-</u>
<u>Elko Formation</u>				
<u>Blue, gray shale</u>		<u>71</u>	<u>224</u>	<u>153</u>
<u>Shale sand</u>	<u>rr</u>	<u>224</u>	<u>242</u>	<u>18</u>
<u>Shale</u>		<u>242</u>	<u>250</u>	
		<u>T.D. 250</u>		

8. WELL CONSTRUCTION

Diameter 10 inches Total depth 250 feet
 _____ inches
 _____ inches
 Casing record 251 x 6.5/8
 Weight per foot 12.92 Thickness 1.185

Diameter	From	To
<u>6.75</u> inches	<u>+1.5</u> feet	<u>250</u> feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet

Surface seal: Yes No Type Best Cement/grout
 Depth of seal 50 feet
 Gravel packed: Yes No
 Gravel packed from 50 feet to 250 feet

Perforations:
 Type perforation touch cut
 Size perforation 1/4 x 4
 From _____ feet to _____ feet
 From 2.10 feet to 250 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Date started 4-26, 1991
 Date completed 5-1, 1991

7. WELL TEST DATA

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

BAILER TEST

G.P.M. 40 Draw down 45 feet 1 hours
 G.P.M. _____ Draw down _____ feet _____ hours
 G.P.M. _____ Draw down _____ feet _____ hours

9. WATER LEVEL

Static water level 71 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 MUTH DRILLING Co. Contractor
 Address 203 PINE ST. 89801 Contractor
 Nevada contractor's license number issued by the State Contractor's Board 10819
 Nevada contractor's driller's number issued by the Division of Water Resources 632
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 632
 Signed James F. Muth By driller performing actual drilling on site or contractor
 Date 5-6-91