

OFFICE USE ONLY
 Log No. 3676.1
 Permit No. _____
 Basin 9-107

WELL DRILLER'S REPORT

Please complete this form in its entirety

NOTICE OF INTENT NO. 14621

PRINT OR TYPE ONLY

1. OWNER Robert Dinsmore ADDRESS AT WELL LOCATION 195 Artesia
 MAILING ADDRESS 195 Artesia Wellington Smith Valley Nev.
 Nev. 89444

2. LOCATION SE 1/4 SW 1/4 Sec. 28 T. 12N N/S R. 23E E Douglas County
 PERMIT NO. 09-021-12 Smith Valley
 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
Sand & Gravel		0	14	14
Gravel		14	38	24
Conglomerate		38	56	18
Clay, Gravel Streaks		56	88	32
Conglomerate		88	112	24
Clay, Sticky		112	145	33
Gravel, lightly cemented	X	145	161	16
Clay, Sticky		161	198	37
Gravel W/Clay seams & fissures	X	198	380	182

'91 AUG 13 AM 39
 STATE ENGINEERS OFFICE

8. WELL CONSTRUCTION
 Diameter 12 1/4" 0-230' Total depth 380 feet
9 7/8" 200-380' inches
 Casing record 8 5/8" and 6 5/8"
 Weight per foot _____ Thickness 0.188

Diameter	From	To
<u>8 5/8</u> inches	<u>0</u> feet	<u>230</u> feet
<u>6 5/8</u> inches	<u>230</u> feet	<u>380</u> feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet

 Surface seal: Yes No Type Concrete Grout
 Depth of seal 50' feet
 Gravel packed: Yes No
 Gravel packed from 50 feet to 380 feet
 Perforations:
 Type perforation Factory Slotted
 Size perforation 3/32" X 3"
 From 195 feet to 215 feet
 From 260 feet to 280 feet
 From 340 feet to 360 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level 105 feet below land surface
 Flow _____ G.P.M. _____ P.S.I.
 Water temperature Cold °F Quality Not Known

Date started 6/10, 1991
 Date completed 6/24, 1991

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump
Airlift	60+	N/A	N/A

BAILER TEST
 G.P.M. N/A Draw down N/A feet _____ hours
 G.P.M. _____ Draw down _____ feet _____ hours
 G.P.M. _____ Draw down _____ feet _____ hours

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Pre-Cambrian Drilling Co. Inc.
 Address 794 Foothill, Rd. Gardnerville, Nv.
 Nevada contractor's license number issued by the State Contractor's Board 0030267
 Nevada contractor's driller's number issued by the Division of Water Resources 1652
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1652
 Signed _____
 By Driller performing actual drilling on site or contractor
 Date July 15, 1991