

PRINT OR TYPE ONLY
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WELL DRILLER'S REPORT

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. 11909

1. OWNER Larry Burkowski ADDRESS AT WELL LOCATION Damen's Ranch
MAILING ADDRESS 208 S. West St. Yerington Nev. 89447
2. LOCATION SW 1/4 SW 1/4 Sec. 22 T. 13 N/S R. 25 E Lyon County
PERMIT NO. none Issued by Water Resources Parcel No. _____ Subdivision Name _____

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Abandon Other _____

4. PROPOSED USE
 Domestic Irrigation Test
 Municipal/Industrial Monitor Stock

5. WELL TYPE
 Cable Rotary RVC
 Air Other _____

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>Sandy loam</u>				
<u>Topsoil</u>		<u>0</u>	<u>12</u>	<u>12</u>
<u>Sand + gravel</u>	<u>yes</u>	<u>12</u>	<u>28</u>	<u>16</u>
<u>Yellow sandy clay</u>		<u>28</u>	<u>36</u>	<u>8</u>
<u>Sand</u>	<u>yes</u>	<u>36</u>	<u>50</u>	<u>14</u>
<u>Gravel + sand with some clay shale</u>	<u>yes</u>	<u>50</u>	<u>130</u>	<u>80</u>

Washed over existing 8 in casing to the depth of 65 ft. then cemented and grouted to surface
See Log 31623

8. WELL CONSTRUCTION
Depth Drilled 60 Feet Depth Cased _____ Feet
HOLE DIAMETER (BIT SIZE)
From _____ To _____
8 Inches 0 Feet 130 Feet
Inches _____ Feet _____ Feet
Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)

Perforations:
Type perforation _____
Size perforation _____
From _____ feet to _____ feet
From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
Depth of Seal 65 Neat Cement
Placement Method: Pumped Cement Grout
 Poured Concrete Grout
Gravel Packed: Yes No
From _____ feet to _____ feet

9. WATER LEVEL
Static water level 12 feet below land surface
Artesian flow _____ G.P.M. _____ P.S.I.
Water temperature _____ °F Quality _____

Date started 11-27-91
Date completed 11-27-91

7. WELL TEST DATA

TEST METHOD: Bailor Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>30+</u>	<u>0</u>	<u>4</u>

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name E M D L C O Contractor
Address _____ Contractor
Nevada contractor's license number 24149 issued by the State Contractor's Board.
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 718
Signed Edmund Miller
By driller performing actual drilling on site or contractor
Date 6-12-92