

OFFICE USE ONLY  
 Log No. 42197  
 Permit No. \_\_\_\_\_  
 Basin 8-102

PRINT OR TYPE ONLY  
 DO NOT WRITE ON BACK

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. 22459

1. OWNER Charles Jones ADDRESS AT WELL LOCATION 1230 E. FIFTH SILVER SPRING NV ST. 89429  
 MAILING ADDRESS 1230 E. FIFTH SILVER SPRING NV, 89429  
 2. LOCATION NE 1/4 NE 1/4 Sec. 8 T. 17 N/S R. 23 E. Lyon County Starkton N.O. 2  
 PERMIT NO. \_\_\_\_\_ 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 Mud

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Blow Sand		0	86	86'
Gravel Chys		86	119	31'
Coarse Gravel	119	119	139	22'
	139			

93 JUL 20 AM 11:21  
 STATE ENGINEERING CO.

8. WELL CONSTRUCTION  
 Depth Drilled 139 Feet Depth Cased 140 Feet  
 HOLE DIAMETER (BIT SIZE)  
 From 10 3/8 Inches To 0 Feet 139 Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 7/8</u>	<u>13</u>	<u>1.88</u>	<u>0</u>	<u>139</u>

Perforations:  
 Type perforation Torch Cut  
 Size perforation 3/16 x 3 x 6 Round  
 From 119 feet to 139 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  
 Depth of Seal 0-50  Neat Cement  
 Placement Method:  Pumped  Cement Grout  
 Poured  Concrete Grout  
 Gravel Packed:  Yes  No  
 From 50' down feet to 139 feet

9. WATER LEVEL  
 Static water level 5.3 feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature C °F Quality Good

Date started 6/25/93 \_\_\_\_\_, 19\_\_\_\_  
 Date completed 6/28/93 \_\_\_\_\_, 19\_\_\_\_

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	<u>56</u>		<u>5 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 Teach Drilling Inc Contractor  
 Address PO 599 Silver Springs NV, 89429 Contractor  
 Nevada contractor's license number issued by the State Contractor's Board 0031841  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1876  
 Signed Daniel Teach By driller performing actual drilling on site or contractor  
 Date 7/14/93