

OFFICE USE ONLY
 Log No. 42570
 Permit No. 9-107
 Basin 9-107

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. 2144-7

1. OWNER WALLACE JOHNSON ADDRESS AT WELL LOCATION 14 NORTON LANE WELINGTON NV 89444
 MAILING ADDRESS _____
 2. LOCATION NW 1/4 SE 27 T 11 N/S R 23 1E LYON County LYON
 PERMIT NO. APR 10 331 18 Parcel No. NORTON Subdivision Name _____
 Issued by Water Resources _____

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>Cemented D. g.</u>	<u>NO</u>	<u>0'</u>	<u>45'</u>	<u>45'</u>
<u>Brn. clay & D. g.</u>	<u>NO</u>	<u>45'</u>	<u>115'</u>	<u>70'</u>
<u>washed gravel</u>	<u>NO</u>	<u>115'</u>	<u>132'</u>	<u>17'</u>
<u>green clay</u>	<u>NO</u>	<u>132'</u>	<u>140'</u>	<u>8'</u>
<u>COARSE SAND & gravel</u>	<u>YES</u>	<u>140'</u>	<u>172'</u>	<u>32'</u>
<u>green clay</u>	<u>NO</u>	<u>172'</u>	<u>180'</u>	<u>8'</u>

8. WELL CONSTRUCTION
 Depth Drilled 180 Feet Depth Cased 180 Feet
 HOLE DIAMETER (BIT SIZE)
9 7/8 Inches From 0 Feet To 180 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>12</u>	<u>1 1/2</u>	<u>0</u>	<u>180</u>

Perforations:
 Type perforation FACT. SAW SLOT
 Size perforation 3/32
 From 140 feet to 180 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout
 Depth of Seal 100'
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From 100 feet to 180' feet

9. WATER LEVEL
 Static water level 60 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature 60.0 °F Quality 900 D

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name ED MILLER Contractor
 Address PO BOX 92 Contractor
SMITH NV 89444
 Nevada contractor's license number issued by the State Contractor's Board 32166
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1533
 Signed Scott Chittard
 By driller performing actual drilling on site or contractor
 Date Aug. 29th 93

Date started Aug. 17th 1993
 Date completed Aug. 22nd 1993

7. WELL TEST DATA

TEST METHOD:	TEST METHOD: <input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift		
	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
	<u>60</u>	<u>NA</u>	<u>2</u>

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 STATE ENGINEERS OFFICE