

OFFICE USE ONLY
 Log No. 42750
 Permit No. 27101
 Basin 27101

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. 22768

1. OWNER Mike Mauer ADDRESS AT WELL LOCATION 569 Sunshine
 MAILING ADDRESS _____
 2. LOCATION NW 1/4 SE 1/4 Sec 6 T 22S R 102E Churchill County
 PERMIT NO. 6-744-16 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
Sand		0	16	16
Clay		16	31	15
SANDY CLAY	✓	31	48	17
Silt		48	49	1
Black Clay		49	58	9
Black Silt	✓	58	69	11
Grey Clay		69	74	5
Grey Clay		74	81	7
Grey Silt	✓	81	86	5
Brown Sand	✓	86	89	3
Grey Clay		89	94	5
Silt	✓	94	104	10
Sand & Gravel	✓	104	117	13

8. WELL CONSTRUCTION
 Depth Drilled 117 Feet Depth Cased 117 Feet
 HOLE DIAMETER (BIT SIZE)
 From To
10 Inches 0 Feet 50 Feet
6 Inches 50 Feet 117 Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 5/8</u>	<u>12.7</u>	<u>.188</u>	<u>1</u>	<u>117</u>

Perforations:
 Type perforation Machine Slot
 Size perforation .040
 From _____ feet to _____ feet
 From 108 feet to 114 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout
 Depth of Seal 50
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level 14 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started Sept 1, 1993
 Date completed Sept 1, 1993

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

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

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Wesco Contractor
 Address Box 888 Fallon NV Contractor
 Nevada contractor's license number issued by the State Contractor's Board 11752
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 772
 Signed [Signature] By driller performing actual drilling on site or contractor
 Date Sept 7 - 93