

STATE OF NEVADA
 DIVISION OF WATER RESOURCES
WELL DRILLER'S REPORT

OFFICE USE ONLY
 Log No. 42822
 Permit No. _____
 Basin 4-44

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

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

NOTICE OF INTENT NO. 23302

1. OWNER Howard Lee Rose ADDRESS AT WELL LOCATION Sixth and McKinley Aves
 MAILING ADDRESS 100-1 RYNDAN
 2. LOCATION NW 1/4 SW 1/4 Sec 36 T 35 N 56 E 1160 County Ryndon
 PERMIT NO. 06-334-41-2 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>Top soil</u>		<u>0</u>	<u>3</u>	<u>3</u>
<u>SANDSTONE</u>		<u>3</u>	<u>18</u>	<u>15</u>
<u>CLAY</u>		<u>18</u>	<u>22</u>	<u>54</u>
<u>SANDSTONE</u>		<u>22</u>	<u>74</u>	<u>52</u>
<u>CLAY</u>		<u>74</u>	<u>134</u>	<u>60</u>
<u>SAND & GRAVEL</u>		<u>134</u>	<u>160</u>	<u>26</u>

8. WELL CONSTRUCTION
 Depth Drilled 160 Feet Depth Cased 160 Feet
 HOLE DIAMETER (BIT SIZE)
 From 10 Inches To 0 Feet 160 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</u>	<u>12.92</u>	<u>1.55</u>	<u>0</u>	<u>160</u>

 Perforations:
 Type perforation slots
 Size perforation 3/16 x 3/4
 From 142 feet to 160 feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type:
 Depth of Seal 54 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 54 feet to 160 feet
 9. WATER LEVEL
 Static water level 61 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature 60 °F Quality Good

Date started 9-27, 1993
 Date completed 9-29, 1993

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 type="checkbox"/> Air Lift	<u>400</u>	<u>20</u>	<u>2.5</u>

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Fertig Drilling Co Contractor
 Address 20 Box 525 Contractor
Elko NV 89803
 Nevada contractor's license number issued by the State Contractor's Board 31904
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1584
 Signed Shaun C Fertig
 By driller performing actual drilling on site or contractor
 Date 10-13-93