

OFFICE USE ONLY
 Log No. 438661
 Permit No. _____
 Basin 9-108
 NOTICE OF INTENT NO. 25095

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

1. OWNER Joyce Gussenhoven ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS Box 736 Lemas
Yerington, NV. 89447 Yerington, Nevada 89447
 2. LOCATION NW 1/4 SE 1/4 Sec. 29 T. 14 N/S R. 25 E _____ County
 PERMIT NO. N/A 14-211-12 Subdivision Name _____
Issued by Water Resources Parcel No.

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 man

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Top soil		0	3	3
Gravels And Bouldas		3	25	22
Gravels And Coarse Sand		25	75	50
Gravels and Boulders		75	125	50
Gravels and Coarse Sand	✓	125	150	25

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 RECEIVED STATE ENGINEERS OFFICE

8. WELL CONSTRUCTION
 Depth Drilled _____ Feet Depth Cased _____ Feet
 HOLE DIAMETER (BIT SIZE)
 From 10 5/8 Inches To 150 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 5/8</u>	<u>13.00</u>	<u>3/16</u>	<u>71</u>	<u>150</u>

Perforations:
 Type perforation Factory cut
 Size perforation 3 x 1/4 x 3 x 6 Rows
 From 150 feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout
 Depth of Seal 0-50
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From 50 feet to 150 feet

9. WATER LEVEL
 Static water level 53 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature Cold °F Quality Good

Date started 10-30 1993
 Date completed 10-31 1993

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>Developed for 3 hour And produced about 36 Gallens a min.</u>		

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Coach Drilling Inc
 Address PO Box 599 Silver Springs NV 89409
 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 1827
 Signed Matrond Leach Jr.
 By driller performing actual drilling on site of contractor
 Date _____