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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. 20058

1. OWNER Doug Dees Const. ADDRESS AT WELL LOCATION 1767 Sateatude  
 MAILING ADDRESS \_\_\_\_\_  
 2. LOCATION SW 1/4 SW 1/4 Sec 36 T. 13 N/S R 20 E Douglas County \_\_\_\_\_  
 PERMIT NO. 23-480-65 Subdivision Name Wild. Flamm-r  
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>-</u>	<u>0</u>	<u>5</u>	<u>5</u>
<u>Med. To large</u>	<u>4</u>	<u>5</u>	<u>110</u>	<u>105</u>
<u>GRAV.</u>				
<u>Brown Clay</u>		<u>100</u>	<u>137</u>	<u>37</u>
<u>Med To Small</u>				
<u>GRAV.</u>	<u>+</u>	<u>127</u>	<u>235</u>	<u>108</u>

8. WELL CONSTRUCTION  
 Depth Drilled 235 Feet Depth Cased 235 Feet  
 HOLE DIAMETER (BIT SIZE)  
 From To  
10 5/8 Inches 0 Feet 235 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>11</u>	<u>.188</u>	<u>1</u>	<u>235</u>

Perforations:  
 Type perforation Factory Milled  
 Size perforation 3/32  
 From 125 feet to 125 feet  
 From 215 feet to 235 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 Surface Seal:  Yes  No Seal Type:  
 Depth of Seal 50  Neat Cement  
 Placement Method:  Pumped  Cement Grout  
 Poured  Concrete Grout  
 Gravel Packed:  Yes  No  
 From 50 feet to 235 feet

9. WATER LEVEL  
 Static water level 80 feet below land surface  
 Artesian flow 21.9 G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature Cold °F Quality Clear

Date started July 5, 1994  
 Date completed July 12, 1994

7. WELL TEST DATA

TEST METHOD:	Bailer	Pump	Air Lift
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)	
<u>30</u>		<u>2</u>	

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.  
 Name Exlar Drilling Co. Contractor  
 Address P.O. Box 1245 Dayton Nev. Contractor  
 Nevada contractor's license number issued by the State Contractor's Board 4739A  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 590  
 Signed Ch. H. H. By driller performing actual drilling on site or contractor  
 Date 7-12-94