

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. 27103

1. OWNER John Osason ADDRESS AT WELL LOCATION 4212
 MAILING ADDRESS 4216 Kyle Dr. Edith's Spring Topog Ranch
Wellington Nev. 89444 Edith's Wellington Ranch, 89444
 2. LOCATION SE 1/4 NE 1/4 Sec. 14 T. 10 N/S R. 24 E Douglas County
 PERMIT NO. none 37-144-02 Topog Ranch Edith's
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
sandy loam		0	3	3
hard pan		3	9	6
yellow clay		9	87	78
Coarse sand + gravel	✓	87	95	8
yellow sandy clay		95	108	13
sand + gravel	✓	108	115	7
hard yellow clay		115	131	16
sand + gravel	✓	131	134	3
hard yellow clay		134	140	6
sand + gravel	✓	140	145	5
yellow sandy clay		145	162	17
large gravel	✓	162	178	16
hard yellow clay		178	182	4
large gravel	✓	182	192	10
clay		192	195	3

8. WELL CONSTRUCTION
 Depth Drilled 195 Feet Depth Cased 195 Feet
 HOLE DIAMETER (BIT SIZE)
 From To
10 Inches 0 Feet 60 Feet
6 Inches 160 Feet 195 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>189</u>	<u>0</u>	<u>195</u>

 Perforations:
 Type perforation Hardy saw slot
 Size perforation 3/32 x 3
 From 160 feet to 195 feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From _____ feet to _____ feet

Date started Aug 4, 1994
 Date completed Aug 10, 1994

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input checked="" type="checkbox"/> Pump <input type="checkbox"/> Air Lift	<u>15+</u>	<u>0</u>	<u>4</u>

9. WATER LEVEL
 Static water level 70 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature cold °F Quality good

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Edmund Miller Contractor
 Address Box 92 Smith Nev 89430 Contractor
 Nevada contractor's license number 32166
 issued by the State Contractor's Board.
 Nevada driller's license number issued by the 718
 Division of Water Resources, the on-site driller.
 Signed Edmund Miller
 By driller performing actual drilling on site or contractor
 Date Aug 11 94