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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. 24678

1. OWNER Elaine P. Lewis ADDRESS AT WELL LOCATION 1035 Badger St. Silver Springs, NV
 MAILING ADDRESS P.O. Box 325 Silver Springs, NV 89429
 2. LOCATION SW 1/4 SW 1/4 Sec 24 T 17 N/S R. 24 E Pawnee Sub #1 Lyon County
 PERMIT NO. 17-413-01 Parcel No. _____ Subdivision Name _____
 Issued by Water Resources _____

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
gray sand		82	95	13
gray clay		95	97	2
coarse brown sand	X	97	125	28

I think old well drilled by Nevada Pump & Drilling know log.

8. WELL CONSTRUCTION
 Depth Drilled 125 Feet Depth Cased 125 Feet
 HOLE DIAMETER (BIT SIZE)
 From 6 Inches 82 Feet 125 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>.188</u>	<u>+1</u>	<u>82</u>
<u>5</u>		<u>.188</u>	<u>65</u>	<u>125</u>

Perforations: Mill
 Type perforation _____
 Size perforation 1/2 X 3
 From 105 feet to 125 feet
 From _____ feet to _____ feet

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

9. WATER LEVEL
 Static water level 36 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature 60 °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 ACE Drilling & Dev. Contractor
 Address P.O. Box 668 Silver Springs, NV 89429 Contractor
 Nevada contractor's license number issued by the State Contractor's Board 14299
 Nevada driller's license number issued by the Division of Water Resources the on-site driller 726
 Signed [Signature] By driller performing actual drilling on site or contractor
 Date 8/15/94

Date started 94 8/14 1994
 Date completed 8/15 1994

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input checked="" type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift	<u>10</u>	<u>0</u>	<u>2</u>