

OFFICE USE ONLY
 Log No. 47100
 Permit No. _____
 Basin. 041

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. 89047

1. OWNER Bedke's K-Savy Ranch Inc. ADDRESS AT WELL LOCATION 2 Miles E of Grande Ranch on South side of Road
 MAILING ADDRESS RT1 Box 96 Oakley, Id. 83346
 2. LOCATION Gaut. Lot 4 1/4 Sec. 5 T. 46 N. S. R. 69 E. E1K0 County
 PERMIT NO. 57260 Issued by Water Resources Parcel No. _____ Subdivision Name Bedke #1

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	Thickness
Top Soil	NO	0	1	1
Broken sandstone & silt	NO	1	11	10
Grey sandstone	NO	11	115	104
Grey Clay	NO	115	135	20
Tan sandstone	NO	135	170	35
Decomposed Rhyolite	yes	170	180	10
Red Rhyolite	yes	180	195	15
Brown Rhyolite	yes	195	251	56
Silty tan clay	?	251	306	55

8. WELL CONSTRUCTION
 Depth Drilled 306 Feet Depth Cased 306 Feet
 HOLE DIAMETER (BIT SIZE)
 From 10 Inches To 50 Feet
 From 8 Inches To 306 Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6"	17	.250	+1	306

Perforations:
 Type perforation Touch
 Size perforation 1/4 x 1/4"
 From _____ feet to _____ feet
 From 176 feet to 305 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 Concrete Grout
 Poured
 Gravel Packed: Yes No
 From 50 feet to 306 feet

9. WATER LEVEL
 Static water level 150 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature Cold °F Quality good

Date started 11-22-94, 1994
 Date completed 3-1-95, 1995

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>15</u>	<u>NONE</u>	<u>2 1/2 hours</u>

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Boley + Henry Contractor
 Address 23551 Hwy 30 W Murtagh Id-83344 Contractor
 Nevada contractor's license number issued by the State Contractor's Board 4641
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 518
 Signed Thad E. Henry
 /By driller performing actual drilling on site or contractor
 Date 1 March 1995