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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

Emergency Replacement
 NOTICE OF INTENT NO. _____

1. OWNER Ray Lowery ADDRESS AT WELL LOCATION 925 MARGRET
 MAILING ADDRESS 925 Margret
Ferry, N.Y. 11735
 2. LOCATION NE 1/4 NE 1/4 Sec 15 T 20 N/S R 24 County Ferry
 PERMIT NO. _____ Parcel No. 20-262-10 Subdivision Name Rancho Estadio
 Issued by Water Resources _____

3. WORK PERFORMED
 New Well Replace Recondition Domestic Irrigation Test
 Deepen Abandon Other _____ Municipal/Industrial Monitor Stock
 4. PROPOSED USE
 5. WELL TYPE
 Cable Rotary RVC
 Air Other Mod

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Soil		0	3	3
Chalk		3	5	2
Sand		5	52	47
Sand, Gravel		52	68	16
Clay		68	74	6
Sand, Gravel		74	85	11
Clay	116	85	116	31
Coarse sand, Gravel	137	116	137	21
Clay		137	139	2

8. WELL CONSTRUCTION
 Depth Drilled 139 Feet Depth Cased 140 Feet
 HOLE DIAMETER (BIT SIZE)
 From 10 3/8 Inches To 139 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</u>	<u>1.88</u>	<u>1</u>	<u>139</u>

10" Well Abandonment. 47425
 Attempted abandonment pull.
 Air Perforate 50' down to 80'
 Pressure Drop 80' up to
 surface. (1/27/95)

Perforations:
 Type perforation (3/16) Mill Perf
 Size perforation x 6 now perf
 From 119 feet to 139 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 139 feet

Date started 1/26/95, 19____
 Date completed 5/23/95, 19____

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	<u>(45+ gpm)</u>	<u>4 1/4 hrs</u>	

9. WATER LEVEL
 Static water level 60' feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature C °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 Loach Drilling Inc Contractor
 Address DO. 599 Contractor
55 NW 1 85428
 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 18726
 Signed [Signature] By driller performing actual drilling on site or contractor
 Date 1/27/95