

OFFICE USE ONLY
 Log No. 47571
 Permit No. _____
 Basin 045

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. 28738

1. OWNER SONNIE Milano ADDRESS AT WELL LOCATION 227 - Crown Blvd
 MAILING ADDRESS 193-2 Pleasant Valley Bldg LANE Pleasant Valley Lot 7
 2. LOCATION S 1/4 1/4 Sec 26 T. 33 N/S R 57 E R110 County _____
 PERMIT NO. 23-011-01-5 Parcel No. _____ Subdivision Name Pleasant Valley
 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
<u>Soil</u>		<u>0</u>	<u>1</u>	<u>1</u>
<u>Gravel</u>		<u>1</u>	<u>12</u>	<u>11</u>
<u>Soft Rock</u>		<u>12</u>	<u>142</u>	
<u>Hard Rock and SAND</u>	<u>x</u>	<u>142</u>	<u>160</u>	<u>18</u>

8. WELL CONSTRUCTION
 Depth Drilled 160 Feet Depth Cased 160 Feet

HOLE DIAMETER (BIT SIZE)
 From 10 Inches To 160 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</u>	<u>1292</u>	<u>188</u>	<u>12</u>	<u>160</u>

Perforations:
 Type perforation slots
 Size perforation _____
 From 140 feet to 160 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 160 feet

Date started 1-20, 1985
 Date completed 1-25, 1985

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>20</u>		<u>4.5</u>

9. WATER LEVEL
 Static water level 63 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature cold °F Quality _____

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Fertig Drilling Co Contractor
 Address P.O. Box 525 Contractor
Elko NV 89501
 Nevada contractor's license number issued by the State Contractor's Board 31904
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1584
 Signed Shaul C Fertig
 By driller performing actual drilling on site or contractor
 Date 2-9-85