

PRINT OR TYPE ONLY
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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 27723

1. OWNER WILLIAM WEAVER ADDRESS AT WELL LOCATION HWY 338
MAILING ADDRESS 510 NIWAY 339 WELLINGTON, NV

2. LOCATION SW 1/4 NW 1/4 Sec. 17 T. 10 S. R. 24 (E) LYON County
PERMIT NO. 10-744-26 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
TOP SOIL		0	18	
GRUS W/SOME SAND		18	35	
GRUS W/SANDY CLAY		35	260	
GRUS W/BROWN CLAY		60	200	
GRUS W/SOME SANDY CLAY WB		200	260	

8. WELL CONSTRUCTION
Depth Drilled 260 Feet Depth Cased 260 Feet

HOLE DIAMETER (BIT SIZE)

From	To
<u>9 7/8</u> Inches	<u>0</u> Feet <u>260</u> 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>1 8/8</u>	<u>0</u>	<u>260</u>

Perforations:
Type perforation FACTORY
Size perforation 3/32/1/2
From 220 feet to 260 feet
From.....feet to.....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 260 feet

9. WATER LEVEL
Static water level 164 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 ED MILLER Contractor
Address P.O. 92 Contractor
SMITH, NV 89444
Nevada contractor's license number issued by the State Contractor's Board 36321
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1226
Signed Ed Miller
By driller performing actual drilling on site or contractor
Date 4-4-95

Date started 3 17 1995
Date completed 3 20 1995

7. WELL TEST DATA

TEST METHOD: <input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift			
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)	
<u>20</u>	<u>UH</u>	<u>3 1/2</u>	