

OFFICE USE ONLY
 Log No. 48012
 Permit No. 102
 Basin. 102

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. 26024

1. OWNER Nathaniel L. Leach ADDRESS AT WELL LOCATION TAMM ARACK ST
 MAILING ADDRESS Box 599 Silver Springs, NV 89429 6. S. W. 89429
 2. LOCATION SE 1/4 NE 1/4 Sec 5 T. 17 N/S R. 25 E Lyda County
 PERMIT NO. 17-103-12 Parcel No. Florence Steele 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 und

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>Sand</u>		<u>0</u>	<u>6</u>	<u>6</u>
<u>Tan Clay</u>		<u>6</u>	<u>46</u>	<u>40</u>
<u>Grey Clay</u>		<u>46</u>	<u>86</u>	<u>40</u>
<u>Tan Clay with some sand</u>		<u>86</u>	<u>92</u>	<u>16</u>
<u>concret</u>		<u>92</u>	<u>120</u>	<u>28</u>

8. WELL CONSTRUCTION
 Depth Drilled 120 Feet Depth Cased 120 Feet
 HOLE DIAMETER (BIT SIZE)
1 1/4 Inches From 0 Feet To 120 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 3/8</u>	<u>13.00</u>	<u>3/16</u>	<u>71</u>	<u>120</u>

Perforations:
 Type perforation Touch Cut
 Size perforation 1 1/4 x 6 Long Bore
 From 100 feet to 120 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 0-50 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 50 feet to 120 feet

9. WATER LEVEL
 Static water level 55 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature cold °F Quality _____

Date started 3-15 1995
 Date completed 4-19 1995

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>Developed From 8 Hours and produced about 50 Gallons A Min</u>			

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Leach Drilling Inc
 Address PO Box 599
Silver Springs NV 89429
 Nevada contractor's license number issued by the State Contractor's Board 00318411
 Nevada driller's license number issued by the Division of Water Resources the on-site driller 1877
 Signed Nathaniel Leach
 By driller performing actual drilling on site or contractor
 Date 4/20/95