

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 30712

1. OWNER John RONALD ADDRESS AT WELL LOCATION Corner of 3rd and Owyhee lot 5 Blk 56
 MAILING ADDRESS PO Box 410 King Beach CA 96143
 2. LOCATION SE 1/4 NE 1/4 Sec. 27 T. 36 N/S R. 57 E. ELKO County
 PERMIT NO. 24-056-05-3 Parcel No. River Valley Ranchos #1 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
CLAY		0	15	15
Gravel	X	15	28	13
CLAY		28	72	44
Gravel	X	72	76	4
CLAY		76	103	27
Gravel	X	103	120	17

8. WELL CONSTRUCTION
 Depth Drilled 120 Feet Depth Cased 120 Feet
 HOLE DIAMETER (BIT SIZE)
 From 10 Inches 0 Feet 120 Feet
 To _____ Inches _____ Feet _____ 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>12.92</u>	<u>1.88</u>	<u>72</u>	<u>120</u>

Perforations:
 Type perforation slots
 Size perforation 3/16 x 3"
 From 100 feet to 120 feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type:
 Depth of Seal 100 Neat Cement
 Placement Method: Pumped Concrete Grout
 Poured
 Gravel Packed: Yes No
 From 100 feet to 120 feet

9. WATER LEVEL
 Static water level 16 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 D.O. Box 525 Elko NV 89801 Contractor
 Nevada contractor's license number issued by the State Contractor's Board 0031904
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1584
 Signed Shelc Fertig By driller performing actual drilling on site or contractor
 Date 4-24-96

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>Appx</u>	<u>40+</u>		<u>1.5</u>

Date started MAY 1, 1996, 19_____
 Date completed MAY 3, 1996, 19_____