

OFFICE USE ONLY
 Log No. 59302
 Permit No. _____
 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. 29347

1. OWNER Randy Wishart ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS 1250 QUINCY ST SILVER SPRINGS NV. 89429
 2. LOCATION SW 1/4 NW 1/4 Sec. 31 T. 18 N/S R. 25 E LYON County _____
 PERMIT NO. 18-523-17 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 MUD

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>Sand & Soil</u>		<u>0</u>	<u>6'</u>	<u>6'</u>
<u>Gravel & Sand</u>		<u>6</u>	<u>30'</u>	<u>24'</u>
<u>Gray Clay</u>		<u>30'</u>	<u>108'</u>	<u>78'</u>
<u>Gravel & Sand</u>	<input checked="" type="checkbox"/>	<u>108'</u>	<u>122'</u>	<u>14'</u>

8. WELL CONSTRUCTION
 Depth Drilled 122' Feet Depth Cased 122' Feet
 HOLE DIAMETER (BIT SIZE)
10 7/8 Inches from 122' Feet To _____ 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>219</u>	<u>+1</u>	<u>122'</u>

Perforations:
 Type perforation Torch Cut
 Size perforation 3/16 x 6
 From 110' feet to 122' 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 122' feet

9. WATER LEVEL
 Static water level 52' feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature 66 °F Quality Clear

Date started 9/27, 1996
 Date completed 9/24, 1996

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>60</u>	<u>50'</u>	<u>AIR TEST FOR 4 HOURS</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 Contractor
 Address PO. Box 599 Contractor
Silver Springs NV. 89429
 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 1740
 Signed Mark Leach Sr
 By driller performing actual drilling on site or contractor
 Date 10/25/96