

OFFICE USE ONLY
 Log No. 64194
 Permit No. _____
 Basin. 048

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 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. 34234

1. OWNER Bill Crane ADDRESS AT WELL LOCATION NORTH W 357 E.M.D. OF ELKO SUMMIT ESTATES ELKO DISTRICT Lot 8A
 MAILING ADDRESS 19 W Hammon Blvd SAGINAW MI.

2. LOCATION NW 1/4 NW 1/4 Sec. 25 T. 34 N/S R. 56 E ELK County
 PERMIT NO. Lot 8A Parcel No. ELKO SUMMIT ESTATES 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
<u>Loam</u>		<u>0</u>	<u>8</u>	<u>8</u>
<u>Brown shale</u>		<u>8</u>	<u>43</u>	<u>35</u>
<u>White SANDSTONE</u>		<u>43</u>	<u>48</u>	<u>5</u>
<u>BLACK shale</u>		<u>48</u>	<u>185</u>	<u>43</u>
<u>Brown Broken shale</u>	<u>X</u>	<u>185</u>	<u>212</u>	<u>27</u>

8. WELL CONSTRUCTION
 Depth Drilled 212 Feet Depth Cased 212 Feet

HOLE DIAMETER (BIT SIZE)
 From 10 Inches To 0 Feet 212 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>188</u>	<u>12</u>	<u>212</u>

Perforations:
 Type perforation slots
 Size perforation 3/16 x 3"
 From 208 feet to 212 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 212 feet

9. WATER LEVEL
 Static water level 180 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature Cold °F Quality _____

Date started 10-2 1996
 Date completed 10-3 1996

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>Appra</u>	<u>15</u>		<u>2.5</u>

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.

Name Fentig Drilling Co Contractor
 Address P.O. Box 525 Contractor
ELKO NV 89803

Nevada contractor's license number issued by the State Contractor's Board 831904
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1584

Signed Shaul C. Fentig
 By driller performing actual drilling on site or contractor
 Date 10-9-96