

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. 3Z1010

1. OWNER Bryan Anthrop ADDRESS AT WELL LOCATION 71020 Springfield Silver Springs, NV.
 MAILING ADDRESS _____
 2. LOCATION NE 1/4 SE 1/4 Sec 8 T. 17 N/S R. 25 County _____
 PERMIT NO. 17-313-05 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 Mod

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
<u>Fine Sand</u>		<u>0</u>	<u>26</u>	<u>26</u>
<u>Fine, Coarse Sand</u>		<u>26</u>	<u>72</u>	<u>46</u>
<u>Fine Sand</u>		<u>72</u>	<u>103</u>	<u>31</u>
<u>Fine Sand, Clay</u>		<u>103</u>	<u>150</u>	<u>47</u>
<u>Fine Sand</u>		<u>150</u>	<u>160</u>	<u>10</u>
<u>Clay</u>		<u>160</u>	<u>170</u>	<u>10</u>
<u>Coarse, Fine Sand</u>		<u>170</u>	<u>178</u>	<u>8</u>

8. WELL CONSTRUCTION
 Depth Drilled 178 Feet Depth Cased 179 Feet
 HOLE DIAMETER (BIT SIZE)
 From 10 5/8 Inches To 1 Feet 178 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>13</u>	<u>1.88</u>	<u>+1</u>	<u>178</u>

Perforations:
 Type perforation Tool Cut
 Size perforation 3/16 x 1/8" x 8# round pipe
 From 170 feet to 178 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout
 Depth of Seal 50'
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From 20 feet to 178' feet

9. WATER LEVEL
 Static water level 34' feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature C °F Quality Good

Date started 1/31/96, 19____
 Date completed 2/1/96, 19____

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>50-55</u>	<u>4 1/2</u>	

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name John Drilling Inc Contractor
 Address PO 599 Contractor
22 NV 82428
 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 1876
 Signed [Signature] By driller performing actual drilling on site or contractor
 Date 2/1/96