

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. 34697  
3083 Highway 50E  
Carson City NV

1. OWNER SOUTHLAND CORP (7-11) ADDRESS AT WELL LOCATION \_\_\_\_\_  
 MAILING ADDRESS 1515 E. TROPICANA STE 700 \_\_\_\_\_  
 2. LOCATION NW 1/4 SE 1/4 Sec 9 T. 15 S. R. 20 E. CARSON County \_\_\_\_\_  
 PERMIT NO. MO 719 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 HSA

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>MW-3</u>				
<u>PULL COVER</u>				
<u>RUN A ROD</u>				
<u>BREAK BOTTOM END OFF OF PVC</u>				
<u>FILL PVC W/ cement W. PUMP</u>				
<u>PULL ALL PVC</u>				
<u>TOP OFF TO GS</u>				

8. WELL CONSTRUCTION  
 Depth Drilled \_\_\_\_\_ Feet Depth Cased 25 Feet  
 HOLE DIAMETER (BIT SIZE)  
 From \_\_\_\_\_ 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>4.37</u>			<u>0</u>	<u>5</u>

Perforations:  
 Type perforation SLOT  
 Size perforation .020  
 From 5 feet to 25 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  Neat Cement  
 Depth of Seal 25  Cement Grout  
 Placement Method:  Pumped  Concrete Grout  
 Poured  
 Gravel Packed:  Yes  No  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

9. WATER LEVEL  
 Static water level 7.5" feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature \_\_\_\_\_ °F Quality \_\_\_\_\_

Date started 2-20 1997  
 Date completed 2-20 1997

7. WELL TEST DATA

TEST METHOD: <input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift			
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)	

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.  
 Name Nevada Drilling Inc Contractor  
 Address 75 LEWERS CREEK ROAD Contractor  
CARSON CITY NV  
 Nevada contractor's license number 13697A  
 issued by the State Contractor's Board  
 Nevada driller's license number issued by the 1902  
 Division of Water Resources, the on-site driller  
 Signed John B. Obied  
 By driller performing actual drilling on site or contractor  
 Date 2-24-97