

OFFICE USE ONLY
 Log No. 65102
 Permit No. 103
 Basin 103
 NOTICE OF INTENT NO. 32464

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

1. OWNER Tupper ADDRESS AT WELL LOCATION 168 Willey Way
 MAILING ADDRESS Mark Twain, NV
 2. LOCATION NW 1/4 SW 1/4 Sec. 20 T. 17 N/S R. 22 E. County
 PERMIT NO. NIA 03-294-11 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 rod

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>Soil</u>		<u>0</u>	<u>3</u>	<u>3</u>
<u>Builders</u>		<u>3</u>	<u>82</u>	<u>79</u>
<u>Black shale</u>		<u>82</u>	<u>300</u>	<u>218</u>
<u>Black shale with cracks</u>		<u>300</u>	<u>320</u>	<u>20</u>

RECEIVED
 APR 22 AM 11:10
 WATER RESOURCES DIVISION

8. WELL CONSTRUCTION
 Depth Drilled 320 Feet Depth Cased 320 Feet
 HOLE DIAMETER (BIT SIZE)
 From 10 5/8 Inches 60 Feet To 60 Feet
 From 7 7/8 Inches 60 Feet To 320 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>13.00</u>	<u>3/16</u>	<u>H</u>	<u>320</u>

Perforations:
 Type perforation Touch cut
 Size perforation 1 1/4 60 days
 From 300 feet to 320 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 0-50 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 50 feet to 320 feet

9. WATER LEVEL
 Static water level 238 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started 3-16 1996
 Date completed 3-19 1996

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>15</u>	<u>60 ft as a min</u>	<u>1 min</u>

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Joseph Drilling Inc Contractor
 Address P.O. Box 579 Contractor
Silver Springs NV 89929
 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 1077
 Signed Mark Twain
 By driller performing actual drilling on site or contractor
 Date 3-20-96