

OFFICE USE ONLY
 Log No. 65151
 Permit No. _____
 Basin. 101

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. 28500

1. OWNER MIKE CASEY ADDRESS AT WELL LOCATION SODA TAKE RD
 MAILING ADDRESS 1550 S Allen

2. LOCATION NW 1/4 NW 1/4 Sec 9 T 19 N/S R 28 E Churchill County
 PERMIT NO. 09-3761 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 _____

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Brown Clay		0	20	20
Brown sands		20	26	6
Grey sands	Y	26	40	14
Black silt		40	60	20
Grey sands		60	83	23
Black Rock		83	105	22
Grey clay		105	107	2
Brown sands	X	107	120	13
Grey sands		120	130	10

8. WELL CONSTRUCTION
 Depth Drilled 130 Feet Depth Cased 130 Feet
 HOLE DIAMETER (BIT SIZE)
 From To
10 3/4 Inches 0 Feet 50 Feet
6 1/8 Inches 50 Feet 130 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>12.9</u>	<u>1/8</u>	<u>11</u>	<u>130</u>

Perforations:
 Type perforation MACHINE CUT
 Size perforation 1.070
 From 107 feet to 117 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 _____ feet to _____ feet

9. WATER LEVEL
 Static water level 8' 6" feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature cool °F Quality OK

Date started 3-18- 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>30</u>		<u>1</u>

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name WELSCO CORP Contractor
 Address 335 N BROADWAY Contractor
Wallon, NV
 Nevada contractor's license number issued by the State Contractor's Board 11752
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1996
 Signed Jesus Mancuern
 By driller performing actual drilling on site or contractor
 Date 3-19-96