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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. 32018

1. OWNER Jim Hardison ADDRESS AT WELL LOCATION #40 Cardinal Ln. Wellington NV.
 MAILING ADDRESS #40 Cardinal Ln. Wellington NV.
 2. LOCATION NE 1/4 NE 1/4 Sec 9 T 12 S R 23 E Lyon County
 PERMIT NO. 10-231-29 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 Mud

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Course DG Sands		0	6	6
DG Sand With Inbedded Gravels		6	45	39
Brown Sandy Clay		45	87	42
DG Sands w/Layers of Brown Clay		87	176	89
Dry Brown Clay		176	207	31
Broken Fracture Gravels w/water	<u>xxx</u>	207	240	33

8. WELL CONSTRUCTION
 Depth Drilled 240 Feet Depth Cased 240 Feet
 HOLE DIAMETER (BIT SIZE)
 From 1 1/4 Inches To 240 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>13.03</u>	<u>.188</u>	<u>0</u>	<u>240</u>

Perforations:
 Type perforation Mill Slot
 Size perforation 3 x 7/32
 From 2.00 feet to 240 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 50 feet to 240 feet

9. WATER LEVEL
 Static water level: 160 feet below land surface
 Artesian flow _____ G.P.M. 20-22 P.S.I.
 Water temperature Cold °F Quality Good

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Capital City Well Drilling Contractor
 Address 20 Kit Kat DR. Carson City NV. 89701 Contractor
 Nevada contractor's license number issued by the State Contractor's Board 41775
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1905
 Signed Michael D. Beck
 By driller performing actual drilling on site or contractor
 Date 3-26-97

Date started 3-23, 1997
 Date completed 3-26, 1997

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>20-22</u>	<u>40</u>	<u>2 HRS</u>

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