

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. 31356

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

1. OWNER Steve Wilman, R.O. Livestock ADDRESS AT WELL LOCATION 7 MILES NORTH OF MONTER VALLEY RANCH - 300 FEET WEST OF COUNTY ROAD.
 MAILING ADDRESS HCR 60 Box 62202 Round Mountain, NV. 89045
 2. LOCATION SE 1/4 SE 1/4 Sec 4 T. 16 N/S R. 47 E. LANDER. County
 PERMIT NO. 7555 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
<u>THIS WELL WAS ABANDON PER INSTRUCTIONS FROM NWR.</u>				
<u>6" CASING WAS REMOVED FROM WELL.</u>				
<u>40 SKS OF ENVIRO DUNE WAS PLACED IN BOTTOM CEMENT WAS THEN MIXED & POURED IN BOTTOM OF WELL TO A DEPTH OF ONE FOOT IT WAS THEN BACKFILLED WITH NATIVE MATERIAL TO ONE FOOT OF SURFACE - CEMENT WAS THEN POURED TO GROUND LEVEL.</u>				
<u>THIS WELL WAS HAND DUG IN 1927 WITH MEASUREMENTS OF 4' X 4' USING JUNIPER TIMBERS FOR SHORING.</u>				
<u>ONLY A TRACE OF WATER STANDING ON BOTTOM OF</u>				
<u>Dug Well</u>				

8. WELL CONSTRUCTION
 Depth Drilled _____ Feet Depth Cased _____ 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)

Perforations:
 Type perforation _____
 Size perforation _____
 From _____ feet to _____ feet
 From _____ feet to _____ feet

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

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

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name LES WOYTEK WOYTEK DRILL CO INC Contractor
 Address 2220 STONE DRIVE Contractor
RENO NEVADA 89511
 Nevada contractor's license number issued by the State Contractor's Board: 024521
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller: 1442
 Signed Thomas M. Harris
 By driller performing actual drilling on site or contractor
 Date 11-11-96

Date started 11-8-96
 Date completed 11-8-96

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)	

RECEIVED
 NOV 14 AM 11:28
 STATE ENGINEERS OFFICE