

OFFICE USE ONLY
 Log No. 66670
 Permit No. 070
 Basin. 070
 NOTICE OF INTENT NO. 17504

WELL DRILLER'S REPORT
 Please complete this form in its entirety

PRINT OR TYPE ONLY

1. OWNER: JACK BURBANS
 MAILING ADDRESS: P.O. Box 563
WINNEMUCCA, NV 89446
 2. LOCATION: SW 1/4, N 1/4 Sec. 29 T. 35 N. N/S R. 37 E. HUMBOLDT County
 PERMIT NO. 14-111-07
 Issued by Water Resources Parcel No. Subdivision Name

3. TYPE OF WORK
 New Well Recondition
 Deepen Other
 4. PROPOSED USE
 Domestic Irrigation Test
 Municipal Industrial Stock
 5. TYPE WELL
 Cable Rotary
 Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
TOP SOIL		0	2	2
SAND + GRAVEL		2	68	66
CLAY + GRAVEL		68	74	6
CLAY		74	130	56
PEE GRAVEL + SAND		130	200	70

8. WELL CONSTRUCTION
 Diameter: 12" inches Total depth: 200' feet
 Casing record:
 Weight per foot: _____ Thickness: 1.88
 Diameter _____ From _____ To _____
 _____ inches _____ feet _____ feet
 Surface seal: Yes No Type: CEMENT
 Depth of seal: 50' feet
 Gravel packed: Yes No
 Gravel packed from: 50' feet to 200' feet
 Perforations:
 Type perforation: LOUVERD
 Size perforation: 2" x 1/4"
 From: 165' feet to 190' feet
 From: _____ feet to _____ feet

Date started: 9-28 1996
 Date completed: 10-29 1996

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump

9. WATER LEVEL
 Static water level: 120' feet below land surface
 Flow: 40 G.P.M. AIR LIFT P.S.I.
 Water temperature: 58° °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: AMERICAN DRILLING & PUMP Contractor
 Address: 3040 CALLAHAN ST
WINNEMUCCA NV 89446 Contractor
 Nevada contractor's license number issued by the State Contractor's Board: 0020578
 Nevada contractor's driller's number issued by the Division of Water Resources: 1161
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller: 2020
 Signed: [Signature]
 By driller performing actual drilling on site or contractor
 Date: 10-29-96

BAILER TEST
 G.P.M. _____ Draw down _____ feet _____ hours
 G.P.M. _____ Draw down _____ feet _____ hours
 G.P.M. _____ Draw down _____ feet _____ hours