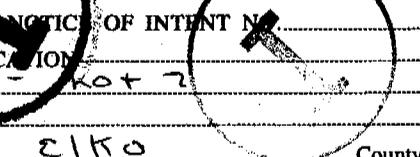


PRINT OR TYPE ONLY  
 DO NOT WRITE ON BACK

WELL DRILLER'S REPORT

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.3



1. OWNER Sanny Langson ADDRESS AT WELL LOCATION Block D - lot 7  
 MAILING ADDRESS Box 6113  
Wendover NV  
 2. LOCATION NW 1/4 NE 1/4 Sec. 12 T. 37 S. R. 69 E. E1K0 County  
 PERMIT NO. \_\_\_\_\_ Issued by Water Resources Parcel No. \_\_\_\_\_ Subdivision Name JLT

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>TOP soil</u>		<u>0</u>	<u>2</u>	<u>2</u>
<u>River Banders</u>		<u>2</u>	<u>54</u>	<u>52</u>
<u>clay sand</u>		<u>54</u>	<u>108</u>	<u>114</u>
<u>gravel sand</u>	<u>X</u>	<u>108</u>	<u>192</u>	<u>24</u>
<u>clay sand</u>		<u>192</u>	<u>200</u>	

8. WELL CONSTRUCTION  
 Depth Drilled 200 Feet Depth Cased 200 Feet  
 HOLE DIAMETER (BIT SIZE)  
 From 10 Inches To \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6</u>		<u>188</u>	<u>0</u>	<u>200</u>

Perforations:  
 Type perforation Factory  
 Size perforation \_\_\_\_\_  
 From 150 feet to 190 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 50 feet to 200 feet

9. WATER LEVEL  
 Static water level 142 feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature \_\_\_\_\_ °F Quality \_\_\_\_\_

Date started August 20, 1996  
 Date completed August 21, 1996

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input checked="" type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift	<u>30 +</u>	<u>0</u>	<u>2</u>

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.  
 Name AAA Drilling Contractor  
 Address P.O. Box 2487 Contractor  
EIKO NV  
 Nevada contractor's license number issued by the State Contractor's Board 0020684  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1438  
 Signed Shane Bennett  
 By driller performing actual drilling on site or contractor  
 Date August 21-96

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 STATE ENGINEERS OFFICE