

OFFICE USE ONLY
 Log No. 68355
 Permit No. _____
 Basin. 049

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. 30686

1. OWNER DONALD Fullerton ADDRESS AT WELL LOCATION OHIO STREET
 MAILING ADDRESS Box 6088 LAST Chance #3
EIKO NU 89802

2. LOCATION SE 1/4 NE 1/4 Sec. 6 T. 34 N/S R. 56 B. EIKO County
 PERMIT NO. 32-005-95-2 LAST Chance #3

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
Loam		0	1	1
CLAY		1	90	89
Cemented Gravel		90	98	8
CLAY		98	110	12
Cemented Gravel		110	114	4
Build CLAY		114	188	74
Green CLAY		188	190	2
Build CLAY Green		190	213	23
Build CLAY		213	252	39
Green color CLAY		252	267	15
BLACK SAND	X	267	274	7
Build CLAY		274	280	6

8. WELL CONSTRUCTION
 Depth Drilled 280 Feet Depth Cased 280 Feet

HOLE DIAMETER (BIT SIZE)
 From To
10 Inches 0 Feet 280 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6	18.92	1.88	12	280

Perforations:
 Type perforation slots
 Size perforation 3/16 x 3"
 From 250 feet to 270 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout

Depth of Seal 5'

Placement Method: Pumped Poured

Gravel Packed: Yes No
 From 5' feet to 280 feet

9. WATER LEVEL
 Static water level 155' feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature cold °F Quality _____

Date started 3-27, 1996
 Date completed 3-30, 1996

7. WELL TEST DATA

TEST METHOD:	TEST METHOD: <input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift		
	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>APAK</u>	<u>14</u>		<u>4.5</u>

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.

Name Fertig Drilling Co Contractor
 Address 20 Box 525 Contractor
EIKO NU 89801

Nevada contractor's license number issued by the State Contractor's Board 0031904

Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1584

Signed Shane C Fertig
 By driller performing actual drilling on site or contractor

Date 4-16-96