

OFFICE USE ONLY
 Log No. **68501**
 Permit No. _____
 Basin. **107**

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. **27705**

1. OWNER Wm & Helen Leveille ADDRESS AT WELL LOCATION OWENS PLACE Rd.
 MAILING ADDRESS 2003 COUNTRY CIRCLE
SPARKS, NV
 2. LOCATION NW 1/4 NE 1/4 Sec 25 T 12 N R 23 E LYON County
 PERMIT NO. 10-121-01 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 |
|------------------------|--------------|------|-----|------------|
| SAND | | 0 | 50 | |
| COURSE SAND / SM GRULS | | 50 | 65 | |
| BLUE CLAY | | 65 | 107 | |
| D. G. | WB | 107 | 145 | |
| BLUE CLAY / SOME GRULS | | 145 | 160 | |

8. WELL CONSTRUCTION
 Depth Drilled 160 Feet Depth Cased 160 Feet
 HOLE DIAMETER (BIT SIZE)
 From _____ To 160
9 7/8 Inches _____ Feet 160 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 7/8</u> | | <u>.188</u> | <u>0</u> | <u>160</u> |

Perforations:
 Type perforation FACTORY
 Size perforation 3/32
 From 120 feet to 140 feet
 From 140 feet to 160 BLANK feet
 From _____ feet to _____ 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 160 feet

9. WATER LEVEL
 Static water level 50 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature COLD Quality SULFUR ODOR

Date started 5-22 1997
 Date completed 5-24 1995

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>30+</u> | <u>0.4</u> | <u>1 1/2</u> |

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Phil Brown / Smith Valley Drilling Contractor
 Address 83 Hudson Aveora Contractor
Smith, NV 89430
 Nevada contractor's license number 41673
 issued by the State Contractor's Board.
 Nevada driller's license number issued by the 1949
 Division of Water Resources, the on-site driller.
 Signed Phil Brown
 By driller performing actual drilling on site or contractor
 Date 5/26/97