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**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. 37203

1. OWNER Connzly Exploration ADDRESS AT WELL LOCATION Gap Mt  
 MAILING ADDRESS 98 Encanto Inc  
P.O. Box 10738 Loveland CO 10  
 2. LOCATION NW 1/4 NW 1/4 Sec. 33 T 5 N/S R 62 E Wye County  
 PERMIT NO. 00 211 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>Top Soil</u>		<u>0</u>	<u>2</u>	<u>2</u>
<u>conglomerate</u>		<u>2</u>	<u>400</u>	<u>398</u>
<u>Dry Hole</u>				
<u>Back filled with</u>				
<u>cuttings to</u>				
<u>50 ft</u>				
<u>Cement 50 ft</u>				
<u>to surface</u>				
<u>Drilling of Log 1978</u>				

8. WELL CONSTRUCTION  
 Depth Drilled 400 Feet Depth Cased \_\_\_\_\_ Feet  
 HOLE DIAMETER (BIT SIZE)  
 From To  
10 Inches 0 Feet 400 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:  
 Depth of Seal \_\_\_\_\_  Neat Cement  
 Placement Method:  Pumped  Cement Grout  
 Poured  Concrete Grout  
 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 \_\_\_\_\_

Date started July 25, 1978  
 Date completed July 29, 1978

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 type="checkbox"/> Air Lift			

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.  
 Name Rockwell Drilling Contractor  
 Address P.O. Box 1000 Contractor  
ELTO RD 89802  
 Nevada contractor's license number issued by the State Contractor's Board 00 30630  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1438  
 Signed Alan Bennett  
 By driller performing actual drilling on site or contractor  
 Date July 28 - 78