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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. 38845

1. OWNER Scott Firestone ADDRESS AT WELL LOCATION 257 JAMES
 MAILING ADDRESS Dayton W. 89403 Dayton W. 89403

2. LOCATION SW 1/4 SE 1/4 Sec. 16 T. 16 N. R. 22 E. Lyon County
 PERMIT NO. 19-654-06 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 RYC
 Air Other Mud

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>overburden</u>		<u>0</u>	<u>6</u>	<u>6</u>
<u>Coarse Sands</u>		<u>6</u>	<u>110</u>	<u>10</u>
<u>Solid Brown Clay</u>		<u>110</u>	<u>43</u>	<u>27</u>
<u>Coarse Brown SANDS small Clay seams</u>		<u>43</u>	<u>110</u>	<u>67</u>
<u>Gray Clay</u>		<u>110</u>	<u>121</u>	<u>11</u>
<u>Obsidian SANDS small DR SANDS small Clay Seams</u>	<u>XX</u>	<u>121</u>	<u>160</u>	<u>39</u>

8. WELL CONSTRUCTION
 Depth Drilled 160 Feet Depth Cased 160 Feet
 HOLE DIAMETER (BIT SIZE)
 From 10 3/4 Inches To 0 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 5/8</u>	<u>13.03</u>	<u>.188</u>	<u>0</u>	<u>160</u>

Perforations:
 Type perforation Mill Slot
 Size perforation 3 x 3/32
 From 140 feet to 160 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 55 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 55 feet to 160 feet

9. WATER LEVEL
 Static water level 20.8 feet below land surface
 Artesian flow _____ G.P.M. 30+ P.S.I.
 Water temperature WARM °F Quality Good

Date started 10-22, 1998
 Date completed 10-23, 1998

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	<u>30+</u>	<u>30</u>	

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Capital City Well Drilling Contractor
 Address 20 Kirtland DR Contractor
CARSON City W. 89706
 Nevada contractor's license number issued by the State Contractor's Board 41775
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1905
 Signed M. Mahady
 By driller performing actual drilling on site or contractor
 Date 10-25-98