

OFFICE USE ONLY  
 Log No. 74519  
 Permit No.  
 Basin 108

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. 37592

1. OWNER Scott L. Edwards ADDRESS AT WELL LOCATION 8 VAN FLEET LANE  
 MAILING ADDRESS 559 Hwy 339 YERINGTON, NEV 89447  
 2. LOCATION NE 1/4 SW 1/4 Sec 9 T 12 N/S R 25 E LYON County  
 PERMIT NO. 12-231-37 Parcel No. Sunny Grove 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	Thickness
Sandy loam Top Soil		0	12	12
HARD PAN		12	16	4
GRAVEL + SAND AND Some small Rock		16	28	12
COARSE SAND + Pea GRAVEL	yes	28	65	37
SAND	yes	65	85	20
GRAVEL + SAND	yes	85	140	55

8. WELL CONSTRUCTION  
 Depth Drilled 140 Feet Depth Cased 140 Feet  
 HOLE DIAMETER (BIT SIZE)  
 From 19 Inches To 50 Feet  
 From 50 Inches To 140 Feet  
 From \_\_\_\_\_ Inches To \_\_\_\_\_ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8		188	0	140

Perforations:  
 Type perforation Factory SAW slot  
 Size perforation 3/32 x 3  
 From 100 feet to 140 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No  
 Depth of Seal 50 feet  
 Placement Method:  Pumped  Cement Grout  
 Poured  Concrete Grout  
 Gravel Packed:  Yes  No  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

9. WATER LEVEL  
 Static water level 35 feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature Cold °F Quality good

Date started NOV 2 1998  
 Date completed NOV 16 1998

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>5 feet</u>	<u>3 Hours</u>

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.  
 Name Edmund Miller Drilling Contractor  
 Address P.O. Box 92 Contractor  
Smith, NEV 89430  
 Nevada contractor's license number issued by the State Contractor's Board 32166  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 718  
 Signed Edmund Miller  
 By driller performing actual drilling on site or contractor  
 Date NOV 18, 1998