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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. 40665

1. OWNER MARK Hanger ADDRESS AT WELL LOCATION 10065 BASS ST SILVER SPRINGS  
 MAILING ADDRESS 8765 HWY 50 W Stage Coach, NV. 89429 N/S R. 2.5 E LYON County  
 2. LOCATION NW 1/4 NW 1/4 Sec. 32 T. 17 PERMIT NO. 015-582-04  
 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	Thickness
<u>sand</u>		<u>0</u>	<u>30</u>	<u>30</u>
<u>clay</u>		<u>30</u>	<u>45</u>	<u>15</u>
<u>sand</u>		<u>45</u>	<u>90</u>	<u>45</u>
<u>clay</u>		<u>90</u>	<u>170</u>	<u>80</u>
<u>sand</u>		<u>170</u>	<u>187</u>	<u>17</u>

8. WELL CONSTRUCTION  
 Depth Drilled 187 Feet Depth Cased 187 Feet  
 HOLE DIAMETER (BIT SIZE)  
 From 12" Inches To 187 Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ 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"</u>	<u>3.2</u>	<u>0.280</u>	<u>0</u>	<u>187</u>

 Perforations:  
 Type perforation 5/8 x 5  
 Size perforation 1/2 x 2"  
 From 180 feet to 187 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 180 feet to 187 feet  
 9. WATER LEVEL  
 Static water level 64 feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature 60W °F Quality good

Date started 6-14, 1999  
 Date completed 6-16, 1999

7. WELL TEST DATA

TEST METHOD: <input type="checkbox"/> Bailer <input checked="" type="checkbox"/> Pump <input type="checkbox"/> Air Lift			
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)	
<u>30</u>	<u>20</u>	<u>4</u>	

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.  
 Name FARRIS DRILLING Contractor  
 Address P.O. Box 5205 Contractor  
Fallon, NV. 89407  
 Nevada contractor's license number issued by the State Contractor's Board 43145  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2082  
 Signed [Signature]  
 Date 7-9-99  
By driller performing actual drilling on site or contractor

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 STATE ENGINEER'S OFFICE