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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. 19454

1. OWNER Lee Zabriske ADDRESS AT WELL LOCATION 5 miles North of Eslerite on US 93 west side
 MAILING ADDRESS PO Box 368 Sandy Valley NV 89019

2. LOCATION N/W 1/4 N/W 1/4 Sec 28 T 3 N 67 E Lincoln County
 PERMIT NO. 13-020-21 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>Top Soil</u>		<u>0</u>	<u>8</u>	<u>8</u>
<u>Sand - boulders</u>		<u>8</u>	<u>50</u>	<u>42</u>
<u>Hard Rock</u>		<u>50</u>	<u>55</u>	<u>5</u>
<u>Sand - Gravel</u>	<u>X</u>	<u>55</u>	<u>100</u>	<u>45</u>
<u>Fractured Rock</u>		<u>100</u>	<u>120</u>	<u>20</u>
<u>Sand - boulders</u>	<u>X</u>	<u>120</u>	<u>150</u>	<u>30</u>
<u>Hard Rock</u>		<u>150</u>	<u>153</u>	<u>3</u>

8. WELL CONSTRUCTION
 Depth Drilled 153 Feet Depth Cased 153 Feet

HOLE DIAMETER (BIT SIZE)
 From 0 To 153
10 5/8 Inches _____ Feet _____
 _____ Inches _____ Feet _____
 _____ Inches _____ Feet _____

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 3/8</u>	<u>-</u>	<u>Sch 40</u>	<u>0</u>	<u>153</u>

Perforations:
 Type perforation Jaw cut
 Size perforation 1/8" x 6"
 From 93 feet to 113 feet
 From 153 feet to 153 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 153 feet

9. WATER LEVEL
 Static water level 22 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature cold °F Quality Good

Date started 8-4-99 19_____
 Date completed 8-6-99 19_____
 7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>19</u>	<u>4</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 Davis Drilling and Pumps Contractor
 Address P.O. Box 54 Hiko NV 89017 Contractor
 Nevada contractor's license number issued by the State Contractor's Board 0028966
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1191
 Signed Mike Davis
 By driller performing actual drilling on site or contractor
 Date 9-12-99

