

OFFICE USE ONLY
 Log No. 76899
 Permit No. 107
 Basin
 NOTICE OF INTENT NO. 22816

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

1. OWNER Joe & DeAnna Jones ADDRESS AT WELL LOCATION 22 Carter Ln
 MAILING ADDRESS 22 Carter Ln Smith NV 89430
 2. LOCATION NW 1/4 NW 1/4 Sec. 28 T 11 N N/S R 24 E Lyon County
 PERMIT NO. 10-451-57 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
Top Soil		0	2	2
Hard Pan		2	4	2
S. Ity Sand		4	26	22
Sand & Gravel		26	31	5
Sand with clay stringers	X	31	118	87
Brown clay		118	120	2
Coarse sand	X	120	131	11
Brown clay		131	138	7
Sand and Gravel	X	138	143	5
Coarse sand	X	143	154	11
Sand and Gravel	X	154	168	14
Coarse sand	X	168	175	7

8. WELL CONSTRUCTION
 Depth Drilled 175 Feet Depth Cased 175 Feet
 HOLE DIAMETER (BIT SIZE)
 From To
10" Inches 0 Feet 50 Feet
6" Inches 50 Feet 175 Feet
 Inches Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	19.05	.250	+1.5	175

Perforations:
 Type perforation Rotary Perforator
 Size perforation 1/4 x 1 1/2
 From _____ feet to _____ feet
 From 156 feet to 163 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout
 Bentonite Grout
 Depth of Seal 5.0
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level 47 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature 64 °F Quality Good

Date started 7/8/99, 1999
 Date completed 7/10/99, 1999

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 checked="" type="checkbox"/> Air Lift	<u>20</u>	<u>150</u>	<u>1</u>

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Riverside Ink Contractor
 Address P.O. Box 720 Contractor
Parma ID 83660
 Nevada contractor's license number 0044881
 issued by the State Contractor's Board
 Nevada driller's license number issued by the 1484
 Division of Water Resources, the on-site driller
 Signed Joseph Jones
 By driller performing actual drilling on site or contractor
 Date 8/2/99