

OFFICE USE ONLY
 Log No. 78337
 Permit No. 100
 Basin 100

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. 41870

1. OWNER Peggy Jones
 MAILING ADDRESS Silver Springs NV 89477
 ADDRESS AT WELL LOCATION 1100 Orange Lane

2. LOCATION W 1/4 SE 1/4 Sec. 8 T. 18 N/S R. 25 E Lyon County
 PERMIT NO. 15-241-98
 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 well

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>Sand boulders</u>		<u>0</u>	<u>43</u>	
<u>Hard shale</u>		<u>43</u>	<u>86</u>	
<u>Hard shale</u>	<input checked="" type="checkbox"/>	<u>86</u>	<u>160</u>	
<u>cracks</u>				

8. WELL CONSTRUCTION
 Depth Drilled 160 Feet Depth Cased 160 Feet
 HOLE DIAMETER (BIT SIZE)
 From To
105/16 Inches 0 Feet 60 Feet
71/16 Inches 60 Feet 160 Feet
 Inches Feet Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>65/8</u>	<u>13.00</u>	<u>3/16</u>	<u>+1</u>	<u>20</u>
<u>65/8</u>	<u>3.00</u>	<u>5/16</u>	<u>20</u>	<u>160</u>

Perforations:
 Type perforation Spill saw
 Size perforation 1 1/4 6 rows 6 rows
 From 160 feet to 160 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout
 Depth of Seal 0-50
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From 0 feet to _____ feet

9. WATER LEVEL
 Static water level: 81 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started 6-20, 1997
 Date completed 6-21, 1997

7. WELL TEST DATA

TEST METHOD:	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	<u>30</u>	
G.P.M. <u>60</u>		
<u>CPM</u>		

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Legach Drilling Inc Contractor
 Address 10 Box 599 Contractor
Silver Springs NV 89477
 Nevada contractor's license number 0031891
 issued by the State Contractor's Board.
 Nevada driller's license number issued by the 11877
 Division of Water Resources, the onsite driller.
 Signed Walter Legach
 By driller performing actual drilling on site or contractor
 Date 6-21-97