

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. 40811

1. OWNER Guard
MAILING ADDRESS _____
ADDRESS AT WELL LOCATION #2 1345 EAST BADGER SILVER Spring
2. LOCATION SW 1/4 SE 1/4 Sec. 24 T. 17 N/S R. 24 E Lyon County
PERMIT NO. 17-417-07
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 MDP

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
SAND		0	6	6
SAND & GRAVEL		6	18	6
GRAVEL		18	62	44
CLAY		62	67	5
BOULDER		67	75	8
Solidified GRAVEL	115 160	75	160	85

8. WELL CONSTRUCTION
Depth Drilled 160 Feet Depth Cased 160 Feet
HOLE DIAMETER (BIT SIZE)
10 5/8 Inches From 1 Feet To 160 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 5/8</u>	<u>13</u>	<u>1.88</u>	<u>1</u>	<u>20</u>
<u>6 5/8</u>	<u>3 1/2</u>	<u>Sch. 40</u>	<u>20</u>	<u>160</u>

Certa-Lock

Perforations:
Type perforation Machine Perf
Size perforation 3/16 x 6 x 8
From 148 feet to 158 feet
From _____ feet to _____ 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 130 feet to 160 feet

9. WATER LEVEL
Static water level: 1/2' feet below land surface
Artesian flow _____ G.P.M. _____ P.S.I.
Water temperature 70 °F Quality _____

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name Seach Drilling Inc. Contractor
Address POB 599 Contractor
SS NU 89429
Nevada contractor's license number issued by the State Contractor's Board: 0031841
Nevada driller's license number issued by the Division of Water Resources, the on-site driller: 1840
Signed [Signature]
By driller performing actual drilling on site or contractor
Date 5/5/99

Date started 4-29-99 19____
Date completed 4-29-99 19____

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>65+</u>		<u>45 min</u>

RECEIVED
99 MAY 21 AM 10:58
STATE ENGINEERS OFFICE