

STATE OF NEVADA
 DIVISION OF WATER RESOURCES
WELL DRILLER'S REPORT

OFFICE USE ONLY
 Log No. 78925
 Permit No. 108
 Basis 108

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

Please complete this form in its entirety in
 accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. 43788

1. OWNER **Peri & Sons** ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS **P.O. Box 35**
Yerington, NV 89447

2. LOCATION **NE 1/4 NE 1/4 Sec. 4 T 13N N/S R 25E E Lyon** County
 PERMIT NO. **W-521 65724** 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	5	
sand		5	14	9
sand & gravel		14	27	13
clay		27	34	7
gravel		34	37	3
clay		37	44	7
sand & gravel		44	46	2
clay		46	50	4
sand & gravel		50	70	20
clay		70	75	5
sand & gravel		75	85	10
clay		85	112	27
sand & gravel		112	125	13
sandy clay-some gravel		125	130	5
fine sand w/pea gravel		130	150	20
sandy clay		150	160	10
sandy clay & pea gravel		160	162	2
sand & gravel		162	175	13
sand		175	180	5
hard sand		180	200	20
clay		200	212	12
sand & gravel		212	255	43
hard sand		255	270	15
clay		270	276	6
sand & gravel		276	289	13

Continued on next page

8. WELL CONSTRUCTION
 Depth Drilled **365** Feet Depth Cased **365** Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	Feet	To	Feet
36	0		50	
26	50		365	

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
30	conductor	.250	0	50
16		.250	+2	365

Perforations:
 Type perforation **louvered & double mill slot**
 Size perforation **1/8 3**

From	feet to	feet
	50	170
	170	210
	210	290
	290	365

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout

Depth of Seal **50**

Placement Method: Pumped Poured

Gravel Packed: Yes No
 From **2** feet to **365** feet

9. WATER LEVEL
 Static water level **12.5** feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature **cool** °F Quality **good**

Date started **1/17/00**, 19
 Date completed **1/19/00**, 19

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
4300	80	8 hrs.
	pumping level	

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.

Name **Humboldt Drilling & Pump Co., Inc.** Contractor
 Address **4675 W. Winnemucca Blvd** Contractor
Winnemucca, Nevada 89445

Nevada contractor's license number issued by the State Contractor's Board **015234**

Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1713**

Signed **Jerry A. Jones**
 By driller performing actual drilling on-site or contractor

Date **1/29/00**

