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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. 19134

1. OWNER Dennis Paulsen ADDRESS AT WELL LOCATION 1051 W. Hurricane St
 MAILING ADDRESS 1051 W. Hurricane St 1051 W. Hurricane St
Reno, NV 89504
 2. LOCATION SW 1/4 SW 1/4 Sec. 29 T. 20 N. R. 53 E. Nye County
 PERMIT NO. 40-521-16 Calvada Valley Unit 5 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 |
|------------|--------------|------|------|------------|
| Brown clay | | 0' | 10' | 10' |
| white clay | | 10' | 35' | 25' |
| brown clay | | 35' | 45' | 10' |
| grey clay | | 45' | 50' | 5' |
| brown clay | | 50' | 60' | 10' |
| grey clay | | 60' | 80' | 20' |
| brown clay | | 80' | 90' | 10' |
| grey clay | | 90' | 100' | 10' |
| brown clay | | 100' | 110' | 10' |
| grey clay | | 110' | 130' | 20' |
| | | 130' | 140' | 10' |

8. WELL CONSTRUCTION
 Depth Drilled 140 Feet Depth Cased 140 Feet
 HOLE DIAMETER (BIT SIZE)
 From 0 To 140
12 Inches 0 Feet 140 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

| Size O.D. (Inches) | Weight/Ft. (Pounds) | Wall Thickness (Inches) | From (Feet) | To (Feet) |
|--------------------|---------------------|-------------------------|-------------|-----------|
| 6.625 | 4.33 | .316 | 0 | 140 |

Perforations:
 Type perforation saw cut
 Size perforation 1 7/8" x 3"
 From 100 feet to 140 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 140' feet

9. WATER LEVEL
 Static water level 58 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started March 12 2001
 Date completed March 19 2001

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 type="checkbox"/> Air Lift | | | |
| | | | |
| | | | |
| | | | |

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Lake Construction Co. Contractor
 Address 4191 S. Jackie St Contractor
Reno, NV 89508
 Nevada contractor's license number issued by the State Contractor's Board 0049225
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2116
 Signed Forest Lake
 By driller performing actual drilling on site or contractor
 Date March 19, 2001

