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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. 41540

1. OWNER Jim Christanson ADDRESS AT WELL LOCATION 3 miles North ~~East~~ East of Jet
 MAILING ADDRESS PO Box 26 Eureka NV 89414 SR 294 e SR 289
 2. LOCATION NE 1/4 NE 1/4 Sec. 3 T 37 N 42 E Humboldt County
 PERMIT NO. 67240 Issued by Water Resources Parcel No. 07-181-03 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	Thickness
<u>Topsoil</u>		<u>0</u>	<u>10</u>	<u>10</u>
<u>Sand</u>		<u>10</u>	<u>100</u>	<u>90</u>
<u>Clay</u>	<u>yes</u>	<u>100</u>	<u>110</u>	<u>10</u>
<u>Sand + Boulder</u>		<u>110</u>	<u>150</u>	<u>40</u>
<u>Clay</u>		<u>150</u>	<u>200</u>	<u>50</u>
<u>Clay + Sand</u>		<u>200</u>	<u>270</u>	<u>70</u>
<u>Sand</u>		<u>270</u>	<u>300</u>	<u>30</u>
<u>Clay</u>		<u>300</u>	<u>360</u>	<u>60</u>
<u>Gravel + Sand</u>	<u>yes</u>	<u>360</u>	<u>400</u>	<u>40</u>

8. WELL CONSTRUCTION
 Depth Drilled 397 Feet Depth Cased 397 Feet
 HOLE DIAMETER (BIT SIZE)
 From 10 5/8 Inches To 0 Feet
 From 0 Feet To 397 Feet
 From 0 Feet To 0 Feet
 From 0 Feet To 0 Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 5/8</u>	<u>10</u>	<u>1 8/8</u>	<u>+3</u>	<u>397</u>

Perforations:
 Type perforation Factory cut
 Size perforation 3/32 x 41
 From 357 feet to 397 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 397 feet

9. WATER LEVEL
 Static water level 150 feet below land surface
 Artesian flow N/A G.P.M. N/A P.S.I.
 Water temperature (at _____ °F Quality Good

Date started July 15 2001
 Date completed July 17 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 checked="" type="checkbox"/> Air Lift			<u>4</u>

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Fred Anderson Drilling Contractor
 Address 10760 Grass Valley Rd Contractor
Winn. NV 89445
 Nevada contractor's license number issued by the State Contractor's Board 021467
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller: 2083
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date Sept 7 2001