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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. 46887

1. OWNER Lillian Ross ADDRESS AT WELL LOCATION 2885 CUSHMAN RD.
 MAILING ADDRESS _____

2. LOCATION ~~SE~~ SE 1/4 ~~NE~~ NE 1/4 Sec. 28 T. 18 N/S R. 29 E. Churchill County
 PERMIT NO. 006-851-78 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 _____

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>Clay</u>		<u>0</u>	<u>11</u>	<u>11</u>
<u>Sand</u>		<u>11</u>	<u>16</u>	<u>5</u>
<u>Black sand/clay</u>		<u>16</u>	<u>145</u>	<u>129</u>
<u>Clay</u>		<u>145</u>	<u>150</u>	<u>5</u>
<u>Sand</u>		<u>150</u>	<u>150</u>	<u>0</u>

8. WELL CONSTRUCTION
 Depth Drilled 150 Feet Depth Cased 150 Feet

HOLE DIAMETER (BIT SIZE)
 From 12 Inches To 0 Feet 150 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</u>	<u>3.2</u>	<u>.280</u>	<u>0</u>	<u>150</u>

Perforations:
 Type perforation 1/8 SLOTS
 Size perforation 1/8 X 3
 From 145 feet to 150 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 100 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout

Gravel Packed: Yes No
 From 145 feet to 150 feet

9. WATER LEVEL
 Static water level 2 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature 76.6 °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 FARRIS DRILLING Contractor
 Address P.O. Box 5205 Contractor
Fallen NV 89407
 Nevada contractor's license number issued by the State Contractor's Board 43145
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2082
 Signed _____
 By driller performing actual drilling on site or contractor
 Date 10-3-01

Date started 9-10-2001
 Date completed 9-14-2001

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>25</u>	<u>6</u>	<u>4</u>