

OFFICE USE ONLY
 Log No. 185721
 Permit No. _____
 Basin 108

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. 47448

1. OWNER Lewis Everett ADDRESS AT WELL LOCATION 305 Miller Lane
 MAILING ADDRESS 305 Miller Lane
Yerington NV.
 2. LOCATION SW 1/4 SE 1/4 Sec. 25 T. 14 N/S R. 25 E. Lyon County
 PERMIT NO. 14-241-38 Parcel No. _____ Subdivision Name _____
Issued by Water Resources

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 mud

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
clay		0	16	16'
Gravel & Sand		16	65	
clay		65	85	
Gravel		85	89	
clay		89	103	
Gravel & Sand	✓	103	125	
clay		125	147	
Sand & Gravel	✓	147	193	
clay		193	198	
Gravel & Sand	✓	198	240	

8. WELL CONSTRUCTION
 Depth Drilled 240' Feet Depth Cased 240' Feet
 HOLE DIAMETER (BIT SIZE)
 From 13 1/4 Inches To 0 Feet 240' Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>8 5/8</u>	<u>19</u>	<u>.188</u>	<u>+1</u>	<u>240'</u>

Perforations:
 Type perforation Factor Saver
 Size perforation 1/8 & 3/8 Pours
 From 200' feet to 240' feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 100' Neat Cement
 Placement Method: Pumped Concrete Grout
 Poured
 Gravel Packed: Yes No
 From 100' feet to 240' feet

9. WATER LEVEL
 Static water level 10' feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature Cold °F Quality clean

Date started 3/5/02, 19____
 Date completed 3/7/02, 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>2 Hr. 300 Gpm air lift.</u>			

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Legh Airlines Inc Contractor
 Address P.O. Box 599 Contractor
Shen Springs NV 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 1872
 Signed [Signature]
 By driller performing equal drilling on site or contractor
 Date 3-7-02