

OFFICE USE ONLY
 Log No. 86098
 Permit No. 102
 Basin 102

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. 42068

1. OWNER Chris Avila ADDRESS AT WELL LOCATION 5285 GREELY SILVER SPRINGS, NV
 MAILING ADDRESS _____
 2. LOCATION NE 1/4 NW 1/4 Sec. 32 T. 18 N/S R. 24 E LYON County
 PERMIT NO. 18-452-04 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
DIRT-COBBLES		0	12	12
DIRT-SAND		12	60	48
HARD DRY CLAY		60	65	5
DIRT-GRAVEL		65	115	50
HARD DRY CLAY		115	125	10
SANDY WET CLAY		125	210	85
HARD DRY CLAY SANDY GRAVEL		210	255	45
HARD DRY CLAY		255	300	45
FRACTURED ROCK		300	350	50

8. WELL CONSTRUCTION
 Depth Drilled 350 Feet Depth Cased 350 Feet
 HOLE DIAMETER (BIT SIZE)
 From 10 3/8 Inches To 120 Feet
 From 9 7/8 Inches To 350 Feet
 From _____ Inches To _____ Feet
 CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 3/8</u>	<u>14</u>	<u>1.88</u>	<u>71</u>	<u>350</u>

 Perforations:
 Type perforation Factory-TORCH CUT
 Size perforation 3/32" x 3"
 From 210 feet to 250 feet TORCH
 From 330 feet to 350 feet factory
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type:
 Depth of Seal 50 ft Neat Cement
 Placement Method: Pumped Poured Concrete Grout
 Gravel Packed: Yes No
 From 50 feet to 350 feet

Date started 1 MAR 02
 Date completed 8 MAR 02

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>25</u>		<u>2.0</u>

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

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Blain Drilling & Pump Co.
P.O. Box 1255
 Address Carson City, NV 89702
 Nevada contractor's license number 46498
 issued by the State Contractor's Board.
 Nevada driller's license number issued by the 2167
 Division of Water Resources, the on-site driller.
 Signed Jack Watson
 By driller performing actual drilling on site or contractor
 Date _____