

OFFICE USE ONLY
 Log No. 88349
 Permit No. _____
 Basin 102

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 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. 46309

1. OWNER Barbara Smith ADDRESS AT WELL LOCATION 184 SANTELOPE ST
 MAILING ADDRESS _____ SILVER SPRINGS, NV
 2. LOCATION NE 1/4 SE 1/4 Sec. 19-44-17 N/S R. 25 E. LYON County
 PERMIT NO. _____ 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
SAND		0	22	22
GRAY CLAY-GRAVEL		22	68	46
SANDY GRAY CLAY		68	105	37
BLACK SANDY GRAVEL	X	105	145	40
GRAY CLAY & SANDY GRAVEL	X	145	165	20
GRAVEL	X	165	180	15

8. WELL CONSTRUCTION
 Depth Drilled 180 Feet Depth Cased 180 Feet
 HOLE DIAMETER (BIT SIZE)
 From 105/8 Inches To 0 Feet 180 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>65/8</u>	<u>14</u>	<u>.188</u>	<u>+1</u>	<u>180</u>

Perforations:
 Type perforation Factory milled
 Size perforation 3/32 x .3
 From 160 feet to 180 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 57 ft Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 57 feet to 180 feet

9. WATER LEVEL
 Static water level 32 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature COLD °F Quality CLEAR

Date started 19 JUNE 02, 19____
 Date completed 20 JUNE 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>25+</u>		<u>4.5</u>

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
Blain Drilling & Pump Co.
 Name P.O. Box 1255
Carson City, NV 89702
 Address _____ Contractor _____
 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 Dotson
 By driller performing actual drilling on site or contractor
 Date 6/21/02

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 STATE ENGINEERS OFFICE