

OFFICE USE ONLY  
 Log No. 89067  
 Permit No. 27061  
 Basin 117  
 23692

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. 23692

1. OWNER Leland Wallace ADDRESS AT WELL LOCATION DYER NV  
 MAILING ADDRESS \_\_\_\_\_  
 2. LOCATION SW 1/4 NE 1/4 Sec. 9 T. 4 N/S R. 36 E. N4E County \_\_\_\_\_  
 PERMIT NO. 27061 007-730-13 01ST #7 Subdivision Name \_\_\_\_\_  
Issued by Water Resources Parcel No.

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	Thick-ness
PREFORATED 16" casing from 0 feet to 100 feet.				
6 Rows with water perforation.				
pumped 12.1 per. cent.				
Bentonite Grout from 300 feet back to 50 feet.				
Set plug at 50 feet.				
pumped neat cement to surface.				

DCNR/DWR RECEIVED  
 APR 14 2003  
 LAS VEGAS OFFICE

8. WELL CONSTRUCTION

Depth Drilled \_\_\_\_\_ Feet Depth Cased \_\_\_\_\_ Feet

HOLE DIAMETER (BIT SIZE)  
 See Log of Old Well.

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)

Perforations:  
 Type perforation Punched  
 Size perforation 3/16" x 1" x 1" apart

From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to 100' feet

Surface Seal:  Yes  No  
 Depth of Seal 300  
 Placement Method:  Pumped  Poured

Gravel Packed:  Yes  No  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Seal Type:  
 Neat Cement  
 Cement Grout  
 Concrete Grout  
BENTONITE GROUT

Date started March 10/03, 20  
 Date completed March 11/03, 20

7. WELL TEST DATA

TEST METHOD:  Bailor  Pump  Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)

9. WATER LEVEL

Static water level 75' feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature \_\_\_\_\_ °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 Leach Drilling Inc Contractor  
 Address PO Box 599 Contractor  
Silver Springs, NV  
 Nevada contractor's license number 31841  
 issued by the State Contractor's Board  
 Nevada driller's license number issued by the 1740  
 Division of Water Resources, the on-site driller  
 Signed Thomas D. Leach  
 By driller performing actual drilling on site or contractor  
 Date April 5/03