

Log No. 89174
Permit No. _____
Basin. 10H

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. 49510

1. OWNER Silver Oak Dev ADDRESS AT WELL LOCATION _____
MAILING ADDRESS 3075 College Dr Silver Oaks Golf Course Fairway 4
Carson City NV Carson City NV
2. LOCATION NW 1/4 SW 1/4 Sec. 6 T. 15 N. S. R. 20 E County _____
PERMIT NO. B-062-09 Parcel No. _____ Subdivision Name Silver Oaks ph 4
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 Sonic

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Soils small gravels		0	5	5
Silty sand		5	10	5
Clay brn		10	12	2
Silty sand gray		12	17	5
Reddish sand		17	25	8
Sand some small gravels		25	30	5
Silty sand		30	40	10
Clayey sand Reddish		40	45	5
Sands				
Sands gray		45	60	15
Silty wet sands	60	60	80	20
Saturated sand		80	82	2
Silty sands gray		82	100	18
gray sand		100	110	10
Clayey sand		110	115	5
Silty sand - gray		115	125	10
sands gray		125	140	15
Sand with brn		140	150	10
Sands				
Silty sand		150	158	8
Reddish brn sand		158	163	7
gray silty sand		163	165	2

8. WELL CONSTRUCTION
Depth Drilled 165 Feet Depth Cased 165 Feet
HOLE DIAMETER (BIT SIZE)
From _____ To _____
8 Inches 0 Feet 165 Feet
Inches _____ Feet _____ Feet
Inches _____ Feet _____ Feet
CASING SCHEDULE
Size O.D. (Inches) Weight/Ft. (Pounds) Wall Thickness (Inches) From (Feet) To (Feet)
4 _____ Sch 80 0 45
4 _____ Sch 80 85 125
Perforations:
Type perforation Factory
Size perforation .020
From 45 feet to 85 feet
From 125 feet to 165 feet
From _____ feet to _____ feet
From _____ feet to _____ feet
Surface Seal: Yes No Seal Type:
Depth of Seal 43 Neat Cement
Placement Method: Pumped Cement Grout
 Poured Concrete Grout
Gravel Packed: Yes No
From 43 - 88 feet to 122 - 165 feet

9. WATER LEVEL
Static water level 600 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 Boat Longyear Co Contractor
Address PO Box 1000 Contractor
Dayton NV 89403
Nevada contractor's license number issued by the State Contractor's Board 0010157
Nevada driller's license number issued by the Division of Water Resources, the on-site driller M 2222
Signed Bruce Anderson
By driller performing actual drilling on site or contractor
Date 2-28-03

Date started Feb 20 2003
Date completed Feb 26 2003

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

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