

OFFICE USE ONLY
 Log No. 907219
 Permit No. _____
 Basin 105

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. 49380

1. OWNER Gerard Buchanan ADDRESS AT WELL LOCATION 952 LA FOND AVE
 MAILING ADDRESS _____

2. LOCATION NE 1/4 NE 1/4 Sec 20 T 12 N/S R 22 E 1/4 NW County _____
 PERMIT NO. 4-291-33 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-ROCK		0	12	12
BOULDERS		12	90	78
DECOMPOSED LAVA		90	260	150
CLAY-GRAVEL		260	345	85
GRAVEL	<input checked="" type="checkbox"/>	345	400	55

8. WELL CONSTRUCTION
 Depth Drilled 400 Feet Depth Cased 400 Feet
 HOLE DIAMETER (BIT SIZE)
 From To
10 5/8 Inches 0 Feet 70 Feet
9 7/8 Inches 70 Feet 400 Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 5/8</u>	<u>14</u>	<u>1.88</u>	<u>41</u>	<u>400</u>

Perforations:
 Type perforation Factory milled
 Size perforation 3/32" x 3"
 From 380 feet to 400 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 54 ft Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 54 feet to 400 feet

9. WATER LEVEL
 Static water level 307 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.
Blain Drilling & Pump Co.
 Name _____ P.O. Box 1255
 Address Carson City, NV 89702
 Contractor _____
 Nevada contractor's license number issued by the State Contractor's Board 46498
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2167
 Signed Jack Dotson
 By driller performing actual drilling on site or contractor
 Date _____

Date started 12 JUNE, 2003
 Date completed 16 JUNE, 2003

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 type="checkbox"/> Air Lift	<u>12-15</u>		<u>1.0</u>

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