

STATE OF NEVADA
 DIVISION OF WATER RESOURCES
WELL DRILLER'S REPORT

OFFICE USE ONLY
 Log No. 91784
 Permit No. _____
 Basin 106
 NOTICE OF INTENT NO. 47921

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

1. OWNER RICK NEUBEM ADDRESS AT WELL LOCATION 3677 QUAIL RUN
 MAILING ADDRESS PO BOX 5096 WELLINGTON NV 89444
GARDNERVILLE NV 89410
 2. LOCATION SE 1/4 SW 1/4 Sec. 6 T. 10 N/S R. 22 E DOUGLAS County
 PERMIT NO. 1022-16-002-090 PLEASANT MEADOWS 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-
<u>BACK FILL/TOPSOIL/LOOSE ROCK</u>		<u>0</u>	<u>8</u>	<u>8</u>
<u>TOPSOIL/LOAM</u>		<u>8</u>	<u>35</u>	<u>27</u>
<u>BWN CLAY/MIXED GRAVEL</u>		<u>35</u>	<u>50</u>	<u>15</u>
<u>COARSE SAND/BWN CLAY</u>		<u>50</u>	<u>55</u>	<u>5</u>
<u>COARSE SAND/GRAVEL</u>		<u>55</u>	<u>73</u>	<u>18</u>
<u>BWN CLAY/COARSE SAND</u>		<u>73</u>	<u>80</u>	<u>7</u>
<u>GRAVEL</u>	<u>YES</u>	<u>88</u>	<u>92</u>	<u>4</u>
<u>COARSE SAND/BWN CLAY</u>	<u>YES</u>	<u>92</u>	<u>110</u>	<u>18</u>
<u>PEA GRAVEL/COARSE SAND</u>	<u>Y</u>	<u>110</u>	<u>140</u>	<u>30</u>
<u>YELLOW CLAY</u>		<u>140</u>	<u>145</u>	<u>5</u>

PLUG

8. WELL CONSTRUCTION
 Depth Drilled 140 Feet Depth Cased 140 Feet
 HOLE DIAMETER (BIT SIZE)
 From To
12 Inches 0 Feet 60 Feet
6 5/8 Inches 60 Feet 140 Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6.625</u>	<u>-</u>	<u>.188</u>	<u>+1.5</u>	<u>140</u>

Perforations:
 Type perforation FACTORY SAW SHOT
 Size perforation .060 X 4" X 8" DC X 6 ROWS
 From 100 feet to 140 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 55' Neat Cement
 Placement Method: Pumped Concrete Grout
 Poured
 Gravel Packed: Yes No
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level 40 feet below land surface
 Artesian flow NO G.P.M. _____ P.S.I.
 Water temperature COLD °F Quality GOOD

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name EDMUND MILLER DRILLING CO. Contractor
 Address PO BOX 92 SMITH NV. Contractor
89430
 Nevada contractor's license number 32166-A
 issued by the State Contractor's Board.
 Nevada driller's license number issued by the 2232
 Division of Water Resources, the on-site driller.
 Signed Bill Sutton BILL SUTTON
 By driller performing actual drilling on site or contractor
 Date 7-29-03

Date started 7-23-03, 19____
 Date completed 7-28-03, 19____

7. WELL TEST DATA

TEST METHOD:	Bailer	Pump	Air Lift
<u>BALE</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)	
<u>287</u>	<u>35</u>	<u>7</u>	

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