

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

OFFICE USE ONLY
 Log No. 92015
 Permit No. _____
 Basin 106

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

NOTICE OF INTENT NO. 48950

1. OWNER Mrs. Barber ADDRESS AT WELL LOCATION East Side Sm
 MAILING ADDRESS 14635 Couch Mnt at Reese Canyon Rd
Road Bend Oregon 97901 Madnessville, Nev.
 2. LOCATION NE 1/4 NE 1/4 Sec. 30 T. 9 N/S R. 23 E. Douglas County
 PERMIT NO. 0923-19-000-413 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
Rock & top soil		0	9	9
Aluminum yellow sandy clay & small rock		9	135	124
sharp gravel & rock	yes	135	162	27
yellow sandy clay with some rock & sand		162	210	52
sharp gravel some coarse sand with yellow clay streaks	yes	210	260	50

8. WELL CONSTRUCTION
 Depth Drilled 260 Feet Depth Cased 260 Feet
 HOLE DIAMETER (BIT SIZE)
 From To
10 Inches 9 Feet 60 Feet
6 Inches 16 Feet 260 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>158</u>	<u>0</u>	<u>260</u>

Perforations:
 Type perforation factory saw slott
 Size perforation 1/16 x 3
 From 200 feet to 260 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 60 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level 150 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature 140 °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 Mills Drilling Contractor
 Address P.O. Box 92 Smith Plr 97432 Contractor

Date started Dec 4
 Date completed Dec 10

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>20</u>	<u>10</u>	<u>3 hrs</u>

Nevada contractor's license number issued by the State Contractor's Board 32166 A
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 718
 Signed Edmund Mills
 By driller performing actual drilling on site or contractor
 Date Jan 15 - 04