

Log No. 92858
 Permit No. _____
 Basin 102

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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. 53384

1. OWNER Tony Sullivan ADDRESS AT WELL LOCATION 3035 E. 6th TAMARACK
 MAILING ADDRESS _____
 2. LOCATION SW 1/4 NW 1/4 Sec. 16 T 17 N/S R 25 E LYEN County
 PERMIT NO. 17-352-01 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
SAND		0	8	8
BROWN CLAY		8	18	10
SANDY BROWN CLAY-GRAVEL		10	118	100
GRAY CLAY-GRAVEL		118	156	38
SANDY GRAVEL		156	188	32
BLACK SANDY CLAY		188	190	2

8. WELL CONSTRUCTION
 Depth Drilled 190 Feet Depth Cased 190 Feet
 HOLE DIAMETER (BIT SIZE)
 From 10 5/8 Inches To 0 Feet 190 Feet
 _____ Inches _____ Feet _____ 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>.188</u>	<u>+1</u>	<u>190</u>

Perforations:
 Type perforation Factory milled
 Size perforation 3/32" x 3'
 From _____ feet to _____ feet
 From 180 feet to 190 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 56 ft Neat Cement
 Placement Method: Pumped Concrete Grout
 Poured
 Gravel Packed: Yes No
 From 56 feet to 190 feet

9. WATER LEVEL
 Static water level 41 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature COLD °F Quality 5.1674

Date started 14 FEB, 2004
 Date completed 16 FEB, 2004

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 checked="" type="checkbox"/> Air Lift	<u>25+</u>		<u>3.5</u>

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name BLAIN DRILLING & PUMP CO. INC.
 Address P.O. Box 1255 Carson City NV 89702
 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 Watson
 By driller performing actual drilling on site or contractor
 Date _____

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