

OFFICE USE ONLY
 Log No. 94517
 Permit No. _____
 Basin. 179

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 26730

1. OWNER Byron E. Robinson ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS 6260 N. Hualapi 840 E. 308th Street
Las Vegas Nevada 89149 Ely, Nevada
 2. LOCATION SE 1/4 SW 1/4 Sec. 7 T. 15N N/S R. 64 E White Pine County
 PERMIT NO. 012-780-11 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
Clay & Gravel		0	130	
Gravel & Water	xx	130	135	5'
Clay & Gravel Reddish		135	220	
Gravel & Water		220	230	10'
Clay & Gravel		230	360	
Gravel & Water		360	418	58'

N 39 - 10 - 554
 W 114 - 49 - 966
 Elevation 6606 Ft Plus or minus 15 ft.

8. WELL CONSTRUCTION
 Depth Drilled 418 Feet Depth Cased 418 Feet
 HOLE DIAMETER (BIT SIZE)
 From To
12 1/4 Inches 0 Feet 55 Feet
9 7/8 Inches 55 Feet 418 Feet
 _____ Inches _____ Feet _____ Feet
 CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8 5/8	16.94	.188	+2	57
6 1/2	SRD PVC		-10	418

Perforations:
 Type perforation Factory
 Size perforation .030 Sieve Type
 From 378 feet to 398 feet
 From 338 feet to 358 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type:
 Depth of Seal 57
 Neat Cement
 Placement Method: Pumped Concrete Grout
 Poured
 Gravel Packed: Yes No
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level 95 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature cold _____ °F Quality _____

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			

Date started 9/19/04, 20____
 Date completed 9/23/04, 20____

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Vernon H. Dimick Contractor
 Address 5360 N. Bonita Vista St. Contractor
Las Vegas, Nevada 89149
 Nevada contractor's license number issued by the State Contractor's Board 10062
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 449 552
 Signed VH Dimick
 By driller performing actual drilling on site or contractor
 Date 10-11-04

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