

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



OFFICE USE ONLY

Log No. 94829
 Permit No. _____
 Basin 103

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. 53375

1. OWNER BRAD McQuerry ADDRESS AT WELL LOCATION 812A PONY EXPRESS
 MAILING ADDRESS _____
 2. LOCATION SE 1/4 NW 1/4 Sec. 8 T. 17 N/S R. 23 E LYON County
 PERMIT NO. 19-281-02 Issued by Water Resources Part of 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
<u>DIRT-GRAVEL</u>		<u>0</u>	<u>21</u>	<u>21</u>
<u>BROWN CLAY-GRAVEL</u>		<u>21</u>	<u>61</u>	<u>40</u>
<u>GRAVEL</u>		<u>61</u>	<u>138</u>	<u>77</u>
<u>BROWN CLAY-GRAVEL</u>		<u>138</u>	<u>180</u>	<u>42</u>
<u>MEDIUM GRAVEL</u>		<u>180</u>	<u>210</u>	<u>30</u>

8. WELL CONSTRUCTION
 Depth Drilled 210 Feet Depth Cased 210 Feet
 HOLE DIAMETER (BIT SIZE)
 From 11 Inches To 0 Feet 210 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>71</u>	<u>10</u>
<u>6 5/8</u>	<u>4</u>	<u>SDR 31</u>	<u>10</u>	<u>210</u>

Perforations:
 Type perforation GRINDER CUT
 Size perforation 2 1/2" x 3"
 From _____ feet to _____ feet
 From 190 feet to 210 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 51 FT Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 51 feet to 210 feet

9. WATER LEVEL
 Static water level 81 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.
 Name BLAIN DRILLING & PUMP CO. INC.
 Address P.O. Box 1255 Carson City NV 89702

Date started 14 MAY 2014
 Date completed 14 MAY 2014

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>1.0</u>

Nevada contractor's license number 46498 issued by the State Contractor's Board
 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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 STATE ENGINEERS OFFICE