



Log No. 96142
 Permit No. _____
 Basin 102

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. 32318

1. OWNER Glen Schaefer ADDRESS AT WELL LOCATION 3060 Prospector Ave Silver Springs NV 89429
 MAILING ADDRESS _____
 2. LOCATION NE 1/4 SE 1/4 Sec 27 T. 18 N/S R. 24 E Lyon County
 PERMIT NO. 18-382-01 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	Thickness
<u>Sand + Big Gravel</u>		<u>0</u>	<u>50</u>	
<u>Red + Black volcanic rock</u>		<u>50</u>	<u>180</u>	
<u>gray clay</u>	<u>+</u>	<u>180</u>	<u>320</u>	
<u>Black + white limestone sand</u>		<u>320</u>	<u>340</u>	
<u>Black clay</u>	<u>+</u>	<u>340</u>	<u>353</u>	

8. WELL CONSTRUCTION
 Depth Drilled 353 Feet Depth Cased 353 Feet
 HOLE DIAMETER (BIT SIZE)
 From 10 5/8 Inches To 60 Feet
 From _____ Inches To _____ Feet
 From 8 3/4 Inches To 353 Feet
 CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 5/8</u>	<u>13</u>	<u>1.88</u>	<u>12</u>	<u>19</u>
<u>6 7/8</u>		<u>SDR21</u>	<u>19</u>	<u>353</u>

Perforations:
 Type perforation swirl
 Size perforation 5/16
 From _____ feet to _____ feet
 From 140 feet to 180 feet
 From _____ feet to _____ feet
 From 320 feet to 340 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 60 feet to 353 feet

9. WATER LEVEL
 Static water level 105 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature 60.0 °F Quality clear

Date started 4-4-05, 20____
 Date completed 4-11-05, 20____

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>10+</u>	<u>180</u>	<u>2 hrs</u>

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Leach Drilling
 Address Box 599 Silver Springs NV 89429
 Nevada contractor's license number issued by the State Contractor's Board 0031841
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1878
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date 4-11-05

RECEIVED
 05 APR 20 AM 11:08
 STATE ENGINEERS OFFICE