

WELL DRILLER'S REPORT

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

Log No. 96317
 Permit No. _____
 Basin 102

NOTICE OF INTENT NO. 52869

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

1. OWNER Eskew ADDRESS AT WELL LOCATION 5710 DAYTON AVE
 MAILING ADDRESS _____
 2. LOCATION SE 1/4 NW 1/4 Sec. 32 T. 18 N/S R. 24 E LYON County
 PERMIT NO. 018-451-12 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
DIRT-GRAVEL		0	8	8
ROCK		8	36	28
BROWN CLAY-GRAVEL		36	142	106
FRAC BLACK ROCK		142	210	68
SOLID BLACK ROCK		210	275	65
LOOSE FRAC ROCK	X	275	290	15
GREENSH CLAY		290	315	25
FRAC. ROCK-CLAY		315	362	47
LARGE GRAVEL	X	362	400	38

8. WELL CONSTRUCTION
 Depth Drilled 400 Feet Depth Cased 400 Feet
 HOLE DIAMETER (BIT SIZE)
 From To
105/8 Inches 0 Feet 50 Feet
97/8 Inches 50 Feet 400 Feet
 Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>65/8</u>	<u>14</u>	<u>1188</u>	<u>41</u>	<u>40</u>
<u>65/8</u>	<u>4</u>	<u>SDR21</u>	<u>40</u>	<u>400</u>

Perforations:
 Type perforation GRINDER CUT
 Size perforation 1.045" X 4"
 From _____ feet to _____ feet
 From 360 feet to 400 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 54 ft Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 54 feet to 400 feet

9. WATER LEVEL
 Static water level 298 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature COLD °F Quality CLEAR

Date started 14 FEB 2005
 Date completed 20 FEB 2005

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>18-20</u>		<u>1.0</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 46498
 issued by the State Contractor's Board
 Nevada driller's license number issued by the 2167
 Division of Water Resources, the on-site driller
 Signed Jack Dotson
 By driller performing actual drilling on site or contractor
 Date 20 FEB 05

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 05 MAR 23 11:20 AM
 STATE ENGINEERS OFFICE