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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. 54121

1. OWNER Roy Lerg ADDRESS AT WELL LOCATION 72 CANARY CT
 MAILING ADDRESS _____
 2. LOCATION NE 1/4 SW 1/4 Sec. 15 T. 11 N/S R. 24 E. Lyon County
 PERMIT NO. 9-172-03 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
BROWN SAND		0	6	6
BR SANDY CLAY		6	55	49
GRAY CLAY		55	75	20
FINE GRAVEL-SAND		75	96	21
DENSE BROWN CLAY		96	100	4
BR SANDY CLAY-GRAVEL		100	110	10
LARGE GRAVEL		110	150	40
DENSE BROWN CLAY		150	195	45
STREAKY CLAY-GRAVEL		195	220	25

8. WELL CONSTRUCTION
 Depth Drilled 220 Feet Depth Cased 220 Feet
 HOLE DIAMETER (BIT SIZE)
 From 11 Inches To 0 Feet 220 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>20</u>
<u>6 5/8</u>	<u>4</u>	<u>.50221</u>	<u>20</u>	<u>220</u>

Perforations:
 Type perforation GRINDER CUT
 Size perforation .045" X 4"
 From _____ feet to _____ feet
 From 200 feet to 220 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
 Cement Grout
 Placement Method: Pumped Concrete Grout
 Poured
 Gravel Packed: Yes No
 From 56 feet to 220 feet

9. WATER LEVEL
 Static water level 76 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature COLD °F Quality CLEAR

Date started 28 JUN 2005
 Date completed 29 JUN 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>25+</u>		<u>1.5</u>

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name _____ Contractor
 Address BLAIN DRILLING & PUMP CO. INC.
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 2167
 issued by the Division of Water Resources, the on-site driller
 Signed Jack Dotson
 By driller performing actual drilling on site or contractor
 Date 29 JUN 05

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 STATE ENGINEERS OFFICE