



PRINT OR TYPE ONLY
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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. 54327

1. OWNER Neil Lindberger
MAILING ADDRESS _____

ADDRESS AT WELL LOCATION #9 Leona Ln Smith Valley

2. LOCATION SW 1/4 NW 1/4 Sec 12 T 10 N/S R 23 E Lyon County
PERMIT NO. 5E Issued by Water Resources Parcel No. 010-711-20 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 well

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
<u>Dirt + Boulders</u>		<u>0</u>	<u>30</u>	<u>30'</u>
<u>Boulders & Clay</u>		<u>30</u>	<u>112'</u>	<u>82'</u>
<u>Clay, Brown</u>		<u>112</u>	<u>118'</u>	<u>6'</u>
<u>Clay & Clay</u>		<u>118</u>	<u>178'</u>	<u>60</u>
<u>Broken Rock</u>		<u>178</u>	<u>200</u>	<u>22'</u>

8. WELL CONSTRUCTION
Depth Drilled 200' Feet Depth Cased 200' Feet
HOLE DIAMETER (BIT SIZE)
10 5/8 Inches From 0 Feet To 200' 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 7/8</u>	<u>Steel</u>	<u>.188</u>	<u>+1</u>	<u>20'</u>
<u>4 1/2</u>	<u>5000</u>	<u>7/16</u>	<u>20</u>	<u>200'</u>

Perforations:
Type perforation Sawed
Size perforation 18 x 4" 6 Rows
From 180' feet to 200' feet
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ 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 200' feet

9. WATER LEVEL
Static water level 85' feet below land surface
Artesian flow _____ G.P.M. _____ P.S.I.
Water temperature Cold °F Quality Clear

Date started 10/10/05, 20 _____
Date completed 10/21/05, 20 _____

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>Air Lifted 3 hrs</u>	<u>30 GPM</u>		

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name Seal Drilling Inc. Contractor
Address P.O. Box 599 Silver Springs, NV Contractor
Nevada contractor's license number issued by the State Contractor's Board 31841
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1740
Signed T. Seal
By driller performing actual drilling on site or contractor
Date 10/28/05