

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. 29518

1. OWNER BEATHY WATER & SANITATION ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS Box 66 BLM LAND
BEATHY NEVADA 89003 BEATHY NEVADA
 2. LOCATION SW 1/4 NW 1/4 Sec. 26 T. 11 N. R. 46 E. Nye County
 PERMIT NO. 38126 1801126 NONE
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
WELL WAS ABANDONED USING				
8 YDS OF NEAT CEMENT				
THE TOTAL DEPTH WAS				
481' AND THE CASING				
WAS PERFORATED FROM				
147' TO 50' BEFORE				
CEMENTING. THE CASING				
WAS CUT OFF 4' BELOW				
GROUND. A 2' CEMENT				
CAP WAS INSTALLED				

8. WELL CONSTRUCTION
 Depth Drilled 450 Feet Depth Cased 450 Feet
 HOLE DIAMETER (BIT SIZE)
 From 12 1/4 Inches To 0 Feet 450 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet
 CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>8 5/8</u>	<u>22.36</u>	<u>1.250</u>	<u>+2</u>	<u>450</u>

Perforations:
 Type perforation MACHINE
 Size perforation 1 1/8 x 2 1/2
 From 150 feet to 430 feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type:
 Depth of Seal 55 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level 21 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started 12-18 20 05
 Date completed 12-21 20 05

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 type="checkbox"/> Air Lift			

DCNR/DWR RECEIVED
 FEB 6 2006

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name LAYNE CHRISTENSEN Contractor
 Address 11001 ETIWANDA AVE. Contractor
FONTANA CA. 92337
 Nevada contractor's license number issued by the State Contractor's Board 0043608
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1660
 Signed M. Walsh
 By driller performing actual drilling on site or contractor
 Date 1-23-06