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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. 28296

1. OWNER Bill Hildebrand ADDRESS AT WELL LOCATION Two miles west of Fda canyon in dry valley
 MAILING ADDRESS HC 79 Box 305 Proche NV 89043
 2. LOCATION NW 1/4 NW 1/4 Sec 6 T 1 N 67 E Lincoln County
 PERMIT NO. 02-060-17 Issued by Water Resources Parcel No. Subdivision Name

3. WORK PERFORMED: New Well, Replace, Recondition, Deepen, Abandon, Other
 4. PROPOSED USE: Domestic, Municipal/Industrial, Irrigation, Monitor, Stock, Test, Other
 5. WELL TYPE: Cable, Rotary, RVC, Air, Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Clay - Balder		0	15	15
Sand - Gravel Balder		15	125	110
Hard Rock		125	130	5
Sand - Gravel	x	130	165	35
Clay - Balder		165	170	5

8. WELL CONSTRUCTION
 Depth Drilled 170 Feet Depth Cased 170 Feet
 HOLE DIAMETER (BIT SIZE)
10 5/8 Inches From 0 Feet To 170 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 1/2</u>		<u>Sch 40</u>	<u>0</u>	<u>170</u>

Perforations:
 Type perforation 59w cut
 Size perforation 1 1/8 x 6 1/4
 From 90 feet to 170 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type: Neat Cement, Cement Grout, Concrete Grout
 Depth of Seal 50
 Placement Method: Pumped, Poured
 Gravel Packed: Yes No
 From 50 feet to 170 feet

9. WATER LEVEL
 Static water level 100 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature 60A °F Quality good

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Davis Drilling and Pumps Contractor
 Address HC 61 Box 59 Hiko NV 89017 Contractor
 Nevada contractor's license number issued by the State Contractor's Board 0028266
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1191
 Signed Mike Davis
 By driller performing actual drilling on site or contractor
 Date 11-11-05

Date started 11-9-05, 20
 Date completed 11-10-05, 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>35</u>		<u>2</u>