

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 56473

1. OWNER Mike Sisketon ADDRESS AT WELL LOCATION S3 FOX ST  
 MAILING ADDRESS \_\_\_\_\_ VERMINGTON, NV  
 2. LOCATION NE 1/4 NE 1/4 Sec 16 T 13 N/S R 26 E Lyon County  
 PERMIT NO. 014-541-29 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	Thickness
SAND		0	23	23
DG & CLAY		23	111	88
DG	<del>X</del>	111	140	29
BROWN SANDY CLAY		140	178	38
DG	<del>X</del>	178	220	42

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>1.188</u>	<u>1</u>	<u>20</u>
<u>6 5/8</u>	<u>4</u>	<u>SDR 21</u>	<u>20</u>	<u>220</u>

Perforations:  
 Type perforation GRINDER CUT  
 Size perforation 1.045" x 4"  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From 19.0 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 54 ft  Neat Cement  
 Placement Method:  Pumped  Cement Grout  
 Poured  Concrete Grout  
 Gravel Packed:  Yes  No  
 From 54 feet to 220 feet

9. WATER LEVEL  
 Static water level 14.7 feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature COLD °F Quality CLEAR

Date started 12 DEC 05, 20\_\_\_\_  
 Date completed 13 DEC 05, 20\_\_\_\_

7. WELL TEST DATA

TEST METHOD: <input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift		
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>18-20</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 BLAIN DRILLING & PUMP CO. INC.  
 Address P.O. Box 1255 Carson City, NV 89702  
 Nevada contractor's license number issued by the State Contractor's Board 46498  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2167  
 Signed Jack Dorton  
 By driller performing actual drilling on site or contractor  
 Date 16 DEC 05