

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. 54289
40 W Sierra View Dr
Smith Camp

1. OWNER EM & Sons ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS _____
 2. LOCATION W 1/4 W/4 1/4 Sec 15 T 11 N/S R 24 E _____ County Hayes
 PERMIT NO. 009-222-12 Parcel No. _____ Subdivision Name (Fitzstevens)
 Issued by Water Resources _____

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
Sand, Gravel		1	68	
Clay		68	115	
Gravels		115	160	
Mottled Clay layers				
Clay		160	249	
Gravels		249	260	
Clay		260	283	
Gravels		283	300	

8. WELL CONSTRUCTION
 Depth Drilled 300 Feet Depth Cased 300 Feet
 HOLE DIAMETER (BIT SIZE)
 From 10 5/8 Inches 1 Feet 300 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet
 CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>10 5/8</u>	<u>13</u>	<u>1.88</u>	<u>1</u>	<u>21</u>
<u>10 5/8 P/C</u>		<u>SNCH</u>	<u>21</u>	<u>300</u>

Perforations:
 Type perforation Mesh Reel
 Size perforation 3/16" Hole
 From 240 feet to 260 feet
 From 280 feet to 300 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type: Neat Cement
 Depth of Seal 80' Cement Grout
 Placement Method: Pumped Concrete Grout
 Poured
 Gravel Packed: Yes No
 From 80 feet to 300 feet

9. WATER LEVEL
 Static water level 104 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature 62 °F Quality Good

Date started 1/17/06, 20____
 Date completed 1/18/06, 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>13-20</u>		<u>1 1/4 hrs</u>	

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name John Dilling Contractor
 Address 20 Box 539 Contractor
23 NV 35123
 Nevada contractor's license number issued by the State Contractor's Board 0021311
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 19576
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date 1-30-06