

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. 55833

1. OWNER Wright Way Farms ADDRESS AT WELL LOCATION N/E Arctian Ranch Rd
 MAILING ADDRESS _____
 2. LOCATION S.W. 1/4 NE 1/4 Sec 30 T. 13 N/S R. 24 E Lyon County _____
 PERMIT NO. 69418 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
Perforations		10	380	
No seal record pumped Abandonite from 380 - up to 10' area				
Neat Cement from 10' to surface				
Abandonite 12' or higher				
11000 gal of plugging material was used in total				
Note Bottom of Hole being drilled 380 does not exist better well firm, and did not lift.				
Casing did not pull and was not removed.				
Plugging of log # 16774				

8. WELL CONSTRUCTION
 Depth Drilled NA Feet Depth Cased 380' Feet
 HOLE DIAMETER (BIT SIZE)
 From _____ To _____
NA Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
16		250		

Perforations:
 Type perforation Torch / Muckin Per
 Size perforation _____
 From 10' feet to 380 - 500 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

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

9. WATER LEVEL
 Static water level 26 feet below land surface
 Artesian flow NO G.P.M. _____ P.S.I. _____
 Water temperature _____ °F Quality _____

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name [Signature] Contractor
 Address P.O. 559 Contractor
23. NV 89425
 Nevada contractor's license number issued by the State Contractor's Board 0031841
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1876
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date 3/4/06

Date started 2/24/06, 20____
 Date completed 4/25/06, 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 type="checkbox"/> Air Lift			