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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

Log No. \_\_\_\_\_  
 Permit No. \_\_\_\_\_  
 Basin **103**

NOTICE OF INTENT NO. ~~57132~~ **57132**

1. OWNER **Lyons County Utilities** ADDRESS AT WELL LOCATION **19762659.8 N**  
 MAILING ADDRESS **3 Lakes Blvd** **2351083.7 E**  
**Dayton NV 89403** **NE 1/4 Sec. 18 T. 16 N. R. 22 E. Lyons County**  
 2. LOCATION **NE 1/4 Sec. 18 T. 16 N. R. 22 E. Lyons** County  
 PERMIT NO. **R-018** Issued by Water Resources Parcel No. **016-351-02** Subdivision Name **Well # 10-22-18-NR-1**

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 **same**

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Orange tan sand		0	7	
Brown to tan sand		7	15	
Brown silt + tan sand		15	41	
Brown silty sand		41	45	
Tan sand		45	49	
Brown silt + sand		49	51	
Brown sand fine to coarse		51	54	
Gray brown silty sand		54	57	
Gray sand fine to coarse		57	73	
Olive gray to brown silty sand		73	75	
DK brown sand with gravel		75	83	
Brown to orange ish sand fine to coarse sand wet		83	95	
39.256000° N				
119.5504030° W				
NO 27 (T)				

8. WELL CONSTRUCTION  
 Depth Drilled **95** Feet Depth Cased **91** Feet

HOLE DIAMETER (BIT SIZE)  
 From **6** Inches To **95** Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<b>2</b>		<b>3/16</b>	<b>0</b>	<b>91</b>

Perforations:  
 Type perforation **slots**  
 Size perforation **020**  
 From **21** feet to **91** feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  
 Depth of Seal **69**  Neat Cement  
 Placement Method:  Pumped  Poured  Cement Grout  Concrete Grout

Gravel Packed:  Yes  No  
 From **09** feet to **95** feet

Date started **9-11** 20**07**  
 Date completed **9-12** 20**07**

7. WELL TEST DATA

TEST METHOD:  Bailer  Pump  Air Lift

TEST METHOD	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<b>Pump</b>	<b>2.56</b>	<b>1.32</b>	<b>2:56</b>

RECEIVED

9. WATER LEVEL  
 Static water level **60** feet below land surface  
 Artesian flow \_\_\_\_\_ 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 **WDC** Contractor  
 Address **PO Box 141** Contractor  
**Zamora WA 95698**  
 Nevada contractor's license number **12852**  
 issued by the State Contractor's Board  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **2111**  
 Signed **Jan Whitley**  
 By driller performing actual drilling on site or contractor  
 Date **1-8-08**