



WELL DRILLER'S REPORT

Please complete this form in its entirety

NOTICE OF INTENT NO. 6902

PRINT OR TYPE ONLY

1. OWNER Eugene Dulicic ADDRESS AT WELL LOCATION Green Acres, Pete Hendrix Rd. Yerington, Nev. 89447
 MAILING ADDRESS Yerington, Nev. 89447
 2. LOCATION * SW 1/4 Sec. 11, T. 13, N. R. 25 E. Lyon County
 PERMIT NO. _____ Parcel No. Green Acres Subdivision Name

3. TYPE OF WORK: New Well Recondition Deepen Other
 4. PROPOSED USE: Domestic Irrigation Industrial Test Stock
 5. TYPE WELL: Cable Rotary Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>Sandy loam Top soil</u>		<u>0</u>	<u>9</u>	<u>9</u>
<u>Sand and gravel</u>	<u>X</u>	<u>9</u>	<u>26</u>	<u>17</u>
<u>Brown, sandy clay</u>		<u>26</u>	<u>34</u>	<u>8</u>
<u>Gravel and coarse sand, some large rock</u>	<u>X</u>	<u>34</u>	<u>120</u>	<u>86</u>

8. WELL CONSTRUCTION
 Diameter 8 inches Total depth 120 feet
 Casing record _____
 Weight per foot _____ Thickness .188
 Diameter From To
8 inches 0 feet 120 feet
 Surface seal: Yes No Type Concrete
 Depth of seal 50 feet
 Gravel packed: Yes No
 Gravel packed from _____ feet to _____ feet
 Perforations:
 Type perforation Factory saw slot
 Size perforation 3/32" x 3"
 From 100 feet to 120 feet

Date started 6-13- 1987
 Date completed 6-18- 1987

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump

9. WATER LEVEL
 Static water level 18 feet below land surface
 Flow _____ G.P.M. _____ P.S.I.
 Water temperature Cold °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 Edmund Miller Contractor
 Address Box 92, Smith, Nev. 89430
 Nevada contractor's license number issued by the State Contractor's Board 24149
 Nevada contractor's driller's number issued by the Division of Water Resources 24149
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 24149
 Signed Edmund Miller
 By driller performing actual drilling on site or contractor
 Date 6-28-87

BAILER TEST
 G.P.M. 30 Draw down 5 feet 3 hours
 G.P.M. _____ Draw down _____ feet _____ hours
 G.P.M. _____ Draw down _____ feet _____ hours