

WELL DRILLER'S REPORT

Please complete this form in its entirety

PRINT OR TYPE ONLY

NOTICE OF INTENT NO. 2487

1. OWNER LAUJOIE ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS Box 173
Fernley Nev.
 2. LOCATION N 1/4 NE 1/4 Sec. 12 T. 35 N. R. 38 County Hamboldt
 PERMIT NO. _____ Parcel No. _____ Subdivision Name Carpenter
 Issued by Water Resources

3. TYPE OF WORK	4. PROPOSED USE	5. TYPE WELL
New Well <input checked="" type="checkbox"/> Recondition <input type="checkbox"/>	Domestic <input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Test <input type="checkbox"/>	Cable <input checked="" type="checkbox"/> Rotary <input type="checkbox"/>
Deepen <input type="checkbox"/> Other <input type="checkbox"/>	Municipal <input type="checkbox"/> Industrial <input type="checkbox"/> Stock <input type="checkbox"/>	Other <input type="checkbox"/>

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
SAND TOP SOIL		0	1	1
HARD BROWN CLAY		1	18	17
SAND & GRAVEL		18	23	5
SAND BROWN CLAY		23	45	22
SAND & GRAVEL		45	49	4
SAND BROWN CLAY		49	55	6
SAND & GRAVEL		55	60	5
SAND BROWN CLAY		60	73	13
HARD SAND		73	80	7
Brown clay w/sandst.		80	142	62

8. WELL CONSTRUCTION

Diameter 8 inches Total depth 142 feet

Casing record _____
 Weight per foot _____ Thickness 1.88

Diameter	From	To
<u>8</u> inches	<u>0</u> feet	<u>142</u> feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet

Surface seal: Yes No Type Cement
 Depth of seal 50 ft feet
 Gravel packed: Yes No
 Gravel packed from _____ feet to _____ feet

Perforations:
 Type perforation Sawcut
 Size perforation 1/2 inch
 From 122 feet to 142 feet
 From _____ feet to _____ feet

Date started 4-11-88 1988
 Date completed 4-7-88 1988

9. WATER LEVEL

Static water level 50 feet below land surface
 Flow good G.P.M. _____ P.S.I. _____
 Water temperature Cold °F Quality good

7. WELL TEST DATA

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

10. DRILLER'S CERTIFICATION

This well was drilled under my supervision and the report is true to the best of my knowledge.

Name Keith K. Kuluchuk Contractor
 Address _____ Contractor
 Nevada contractor's license number 24091
 issued by the State Contractor's Board
 Nevada contractor's driller's number _____
 issued by the Division of Water Resources
 Nevada Driller's license number issued by the 795
 Division of Water Resources the on-site driller
 Signed Keith K. Kuluchuk
 By driller performing actual drilling on site or contractor
 Date 5-5-88

BAILER TEST

G.P.M.	Draw down	feet	hours