

**WELL DRILLER'S REPORT**

Please complete this form in its entirety

PRINT OR TYPE ONLY

NOTICE OF INTENT NO. 12936

1. OWNER Melvin Owens ADDRESS AT WELL LOCATION \_\_\_\_\_  
 MAILING ADDRESS 20565 Edmonds dr 2619 Stewart Ave  
Casper City, Nev 89001  
 2. LOCATION SE 1/4 SW 1/4 Sec. 39 T. 19 N/S R. 20 E. Douglas County  
 PERMIT NO. \_\_\_\_\_ Issued by Water Resources Parcel No. \_\_\_\_\_ Subdivision Name Thompson

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

6. LITHOLOGIC LOG

| Material             | Water Strata | From | To  | Thick-ness |
|----------------------|--------------|------|-----|------------|
| CLAY & SAND          |              | 0    | 25  |            |
| CLAY SAND & GRAVEL   |              | 25   | 65  |            |
| CLAY & SAND          | X            | 65   | 75  |            |
| CLAY & SAND & GRAVEL | X            | 75   | 80  |            |
| SAND                 | X            | 80   | 105 |            |
| CLAY SAND & GRAVEL   | XX           | 105  | 135 |            |

8. WELL CONSTRUCTION  
 Diameter 12 inches Total depth 135 feet  
 \_\_\_\_\_ inches  
 \_\_\_\_\_ inches  
 Casing record Without casing to 6" 135"  
 Weight per foot 5 Thickness 156  

| Diameter        | From          | To              |
|-----------------|---------------|-----------------|
| <u>6</u> inches | <u>0</u> feet | <u>135</u> feet |
| _____ inches    | _____ feet    | _____ feet      |
| _____ inches    | _____ feet    | _____ feet      |
| _____ inches    | _____ feet    | _____ feet      |
| _____ inches    | _____ feet    | _____ feet      |
| _____ inches    | _____ feet    | _____ feet      |

 Surface seal: Yes  No  Type Five part  
 Depth of seal 50 feet  
 Gravel packed: Yes  No   
 Gravel packed from 135 feet to 50 feet  
 Perforations:  
 Type perforation Factory Perf  
 Size perforation 3" x 5/32"  
 From 135 feet to 115 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Date started 1-7 1990  
 Date completed 1-8 1990

7. WELL TEST DATA

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

9. WATER LEVEL  
 Static water level 70 feet below land surface  
 Flow 20+ 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 Michael Drilling Services Contractor  
 Address 2468 Fowler Nevada, Nev Contractor  
 Nevada contractor's license number issued by the State Contractor's Board #021268  
 Nevada contractor's driller's number issued by the Division of Water Resources #1380  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller #1495  
 Signed Michael Drilling  
 By driller performing actual drilling on site or contractor  
 Date 1-8-90

BAILER TEST  
 G.P.M. \_\_\_\_\_ Draw down \_\_\_\_\_ feet \_\_\_\_\_ hours  
 G.P.M. \_\_\_\_\_ Draw down \_\_\_\_\_ feet \_\_\_\_\_ hours  
 G.P.M. \_\_\_\_\_ Draw down \_\_\_\_\_ feet \_\_\_\_\_ hours