

WELL DRILLER'S REPORT

Please complete this form in its entirety

PRINT OR TYPE ONLY

NOTICE OF INTENT NO. **No. 688**

1. OWNER **BONANAZA Opal Mine** **Dick Leager**
Low Olds
 MAILING ADDRESS **390 Pamlar Ave** ADDRESS AT WELL LOCATION **2 1/4 miles South Sr 140 mile marker 91**
SAN JOSE CALIF 95128-4217

2. LOCATION **NE 1/4 SW 1/4 Sec 2 T 45 N SR 26 E Humboldt** County
 PERMIT NO. **NA** Issued by Water Resources Parcel No. **NA** Subdivision Name

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
SAND + GRAVEL		0	10	
Brown Clay		10	30	
Green Clay		30	40	
Purple Clay		40	75	
Pink Clay		75	90	
Purple Clay		90	290	
Green Ashor Tuff	Gal per min	290	730	
Streamer Riolite		730	770	
Lost Circulation 700 Gpm		770		
Artesian				

Artesian Pressure Flowed 70 GPM
 INSTALLED 200' 6 5/8" Casing Cemented
 TO SURFACE INSTALLED A CONTROL
 VALVE AT SURFACE, TO SHUT H2O OFF,
 WHEN CONTAINED WELL MAKES 14 PSI

JUL 30 AM 11:27
 RECEIVED
 STATE ENGINEERS OFFICE

8. WELL CONSTRUCTION

Diameter **14** inches Total depth **770** feet
10 inches
6 5/8 inches
 Casing record _____
 Weight per foot _____ Thickness **.188**

Diameter	From	To
10 inches	0 feet	40 feet
6 5/8 inches	0 feet	200 feet
3 inches	178 feet	770 feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet

 Surface seal: Yes No Type **Cement Slurry**
 Depth of seal **200'** feet
 Gravel packed: Yes No
 Gravel packed from _____ feet to _____ feet
 Perforations:
 Type perforation **Torch Cut**
 Size perforation **1/8 to 1/4**
 From **750** feet to **770** feet
 From _____ feet to _____ feet

Date started **6 1** 19 **90**
 Date completed **6 18** 19 **90**

7. WELL TEST DATA

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

BAILER TEST

G.P.M. _____ Draw down _____ feet _____ hours
 G.P.M. _____ Draw down _____ feet _____ hours
 G.P.M. _____ Draw down _____ feet _____ hours

9. WATER LEVEL

Static water level **SURFACE** feet below land surface
 Flow **5** G.P.M. **14** P.S.I.
 Water temperature **93** °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 **Fred Anderson** Contractor
 Address **10760 Grass Valley Rd** Contractor
 Nevada contractor's license number issued by the State Contractor's Board **021467**
 Nevada contractor's driller's number issued by the Division of Water Resources **1375**
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1375**
 Signed _____
 By driller performing actual drilling on site or contractor
 Date **6-18-90**