

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

WELL DRILLER'S REPORT
 Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. **19747**

1. OWNER **Herb Diane Mitchell** ADDRESS AT WELL LOCATION **Gardnerville NV. 1840 Tyler Lane**
 MAILING ADDRESS **P.O. Box 762 Gardnerville NV.**
 2. LOCATION **NE 1/4 NE 1/4 Sec 25 T 13 N S R 20 E Douglas County**
 PERMIT NO. **23-130-11** Issued by Water Resources Parcel No. _____ Subdivision Name _____

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 **Muc**

6. LITHOLOGIC LOG

| Material | Water Strata | From | To | Thick-ness |
|-----------------------------------|--------------|------|------|------------|
| Hard Clay | | 0' | 15' | 15' |
| 1/4 Gravels | | 15' | 40' | 25' |
| Brown Sandy Clay w/ small Gravels | | 40' | 75' | 35' |
| Soft Brown Clay | | 75' | 130' | 55' |
| Small Gravels w/ small Clay seams | | 130' | 180' | 50' |
| Soft Brown Clay | xx | 180' | 195' | 15' |
| 3/8 Gravels w/ small Clay seams | xx | 195' | 220' | 25' |
| T.D. 220 | | | | |

8. WELL CONSTRUCTION
 Depth Drilled **220'** Feet Depth Cased **220'** Feet
 HOLE DIAMETER (BIT SIZE)
 From To
11 3/4 Inches **0'** Feet **55'** Feet
9 7/8 Inches **55'** Feet **220'** Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

| Size O.D. (Inches) | Weight/Ft. (Pounds) | Wall Thickness (Inches) | From (Feet) | To (Feet) |
|--------------------|---------------------|-------------------------|-------------|------------|
| 6 7/8 | 13.03 | .188 | 0 | 220 |

Perforations:
 Type perforation **Mill slot**
 Size perforation **3 1/2 x 3/32**
 From _____ feet to _____ feet
 From **180'** feet to **220'** feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type:
 Depth of Seal **55'** Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From **55'** feet to **220'** feet

9. WATER LEVEL
 Static water level **80** feet below land surface
 Artesian flow _____ G.P.M. **2.5** P.S.I.
 Water temperature **Cold** °F Quality **Good**

Date started **7-13-92**
 Date completed **7-13-92**

7. WELL TEST DATA

| TEST METHOD: | G.P.M. | Draw Down (Feet Below Static) | Time (Hours) |
|--|-----------|-------------------------------|--------------|
| <input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift | 25 | 25' | 2 hr. |

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge. **A & H PUMP CO.**
 Name **5551 Hwy. 50 East #3**
Person City, Nevada 89716
 Address **885-1885**
 Nevada contractor's license number issued by the State Contractor's Board **31839**
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1674**
 Signed **Joe Butts**
 By driller performing actual drilling on site or contractor
 Date **7-17-92**