

PRINT OR TYPE ONLY
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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. 22308

1. OWNER Jeff and Amy Potter ADDRESS AT WELL LOCATION No address
 MAILING ADDRESS not designated Seneca St.
P.O. 776 Carson City 89702
 2. LOCATION SW 1/4 SE 1/4 Sec. 12 T. 17 N/S R. 22 E Lyon County
 PERMIT NO. N/A 15-354-10 Iron Mountain 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 _____

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>Surface and boulders</u>	<u>clay, clay, gravel</u>	<u>0</u>	<u>8' 8"</u>	
<u>Hard green granite broken granite + white crystal</u>	<u>✓</u>	<u>8</u>	<u>220</u>	<u>220</u>
		<u>228</u>	<u>250</u>	<u>22</u>

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 RECEIVED STATE ENGINEERS DEPT

8. WELL CONSTRUCTION
 Depth Drilled 250 Feet Depth Cased 251.3 Feet
 HOLE DIAMETER (BIT SIZE)
 From To
10 5/8 Inches 0 Feet 60 Feet
8 3/4 Inches 60 Feet 250 Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6.58</u>	<u>13</u>	<u>1.88</u>	<u>0</u>	<u>250</u>

Perforations:
 Type perforation Torch Cut #
 Size perforation 3/16 x 10 x 5
 From 230 feet to 250 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 60' Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 60 feet to 250 feet

9. WATER LEVEL
 Static water level 60' feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature Warm 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 Leach Well Drilling Contractor
 Address 599 Silver Springs NV Contractor
89429
 Nevada contractor's license number issued by the State Contractor's Board 0031841
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1740-T1
 Signed Daniel J. Leach
 By driller performing actual drilling on site or contractor
 Date 3/18/93

Date started 3/24/93
 Date completed 3/2/93
 7. WELL TEST DATA
 TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>Air Lifted 30 gpm from 250 for 2 mo.</u>		