

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. 25098

1. OWNER Gene Saccone ADDRESS AT WELL LOCATION 8510 Tahoe Stage Coach, Nevada
 MAILING ADDRESS 8510 Tahoe Stage Coach, Nevada
 2. LOCATION NE 1/4 SW 1/4 Sec. 11 T. 17 N/S R. 23 E Lyon County
 PERMIT NO. N/A 19-383-23 Rancho 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 med

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Tan Clay		0	15	15
Gravels and boulders		15	56	41
Brown Clay		56	64	8
Boulders and Gravels		64	74	10
Gravels and some Brown Clay		74	125	51
Tan Clay		125	140	15
Clay and fine Gravels		140	150	10

8. WELL CONSTRUCTION
 Depth Drilled 150 Feet Depth Cased 150 Feet
 HOLE DIAMETER (BIT SIZE)
 From 10 5/8 Inches To 0 Feet 150 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 5/8</u>	<u>13.00</u>	<u>3/16</u>	<u>+1</u>	<u>150</u>

Perforations:
 Type perforation AIR DEEP
 Size perforation 7/16 X 1 X 1 X 5 Rows
 From 100 feet to 150 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout
 Depth of Seal 0-50
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From 50 feet to 150 feet

9. WATER LEVEL
 Static water level 55 feet below land surface
 Artesian flow N/A G.P.M. N/A P.S.I.
 Water temperature 60 °F Quality Good

Date started 10-6-93
 Date completed 10-7-93

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			
<u>Developed for 3 hours and produced about 25 to 30 Gallons A MIN</u>			

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge
 Name Rich Drilling Inc
 Address P.O. Box 579 Silver Springs NV 89429
 Nevada contractor's license number issued by the State Contractor's Board _____
 Nevada driller's license number issued by the Division of Water Resources the on-site driller _____
 Signed William Leach JR
 By driller performing actual drilling on site or contractor
 Date 10-19-93

'93 OCT 28 P1 06
 STATE ENGINEERS OFFICE