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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. 22885

1. OWNER Ronald John P. Rexford ADDRESS AT WELL LOCATION Rt 53 lot 2
 MAILING ADDRESS P.O. Box 410 Kings Beach Calif South of Kings River Between Third & Fourth St

2. LOCATION SW 1/4 SW 1/4 Sec 26 T. 36 N/S R. 57 E Elko County
 PERMIT NO. 24-053-07-06 River Valley Ranches 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
Loam		0	2	2
CLAY		2	12	10
Gravel	X	12	28	16
CLAY		28	54	26
Gravel	X	54	65	11
CLAY		65	90	25
Gravel	X	90	98	8
CLAY		98	100	2
Gravel	X	100	120	20

8. WELL CONSTRUCTION
 Depth Drilled 120 Feet Depth Cased 120 Feet

HOLE DIAMETER (BIT SIZE)
 From 10 Inches 0 Feet 120 Feet
 To 10 Inches 0 Feet 120 Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 5/8</u>	<u>12.92</u>	<u>188</u>	<u>+2</u>	<u>120</u>

Perforations:
 Type perforation Slots
 Size perforation 3/16 x 3"

From 101 feet to 121 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout

Depth of Seal 101

Placement Method: Pumped
 Poured

Gravel Packed: Yes No
 From 101 feet to 120 feet

9. WATER LEVEL
 Static water level 12 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature 60 °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 Fentig Drilling Co Contractor
 Address P.O. Box 525 Contractor
Elko NV 89803

Nevada contractor's license number issued by the State Contractor's Board 31904
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1584

Signed Shorel C. Fentig
 By driller performing actual drilling on site or contractor
 Date 4-14-94

Date started 4-8 1994
 Date completed 4-11 1994

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>45</u>		<u>4</u>