

OFFICE USE ONLY
 Log No. 44477
 Permit No. _____
 Basin. 102

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. 24671

1. OWNER Bob Mattson ADDRESS AT WELL LOCATION 3125 E 4th St
 MAILING ADDRESS P.O. Box 20427 Silver Springs, NV 89429
Sparks, NV 89433

2. LOCATION NE 1/4 NW 1/4 Sec. 2109 T. 17 N. R. 25 E. Lyon County
 PERMIT NO. 17-174-06 Parcel No. Putman #2 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>fine to coarse sand</u>		<u>0</u>	<u>33</u>	<u>33</u>
<u>Brown Clay</u>		<u>33</u>	<u>64</u>	<u>31</u>
<u>Fine to coarse sand</u>	<u>X</u>	<u>64</u>	<u>72</u>	<u>8</u>
<u>Brown Clay with some gray clay</u>		<u>72</u>	<u>105</u>	<u>33</u>
<u>fine to coarse sand</u>	<u>X</u>	<u>105</u>	<u>130</u>	<u>25</u>

JUN -6 P214A
 STATE ENGINEERS OFFICE

8. WELL CONSTRUCTION
 Depth Drilled 130 Feet Depth Cased 130 Feet

HOLE DIAMETER (BIT SIZE)
 From 0 Feet To 130 Feet
10 5/8 Inches _____ Feet _____ 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>.188</u>	<u>+1</u>	<u>130</u>

Perforations:
 Type perforation Mill
 Size perforation 1/8 x 3
 From 110 feet to 130 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 50 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout

Gravel Packed: Yes No
 From 50 feet to 130 feet

9. WATER LEVEL
 Static water level 42 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature cold °F Quality good

Date started 5/25, 1994
 Date completed 5/26, 1994

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>18</u>	<u>2</u>	<u>2</u>

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.

Name ACE Drilling & Dev.
 Address P.O. Box 668
Silver Springs, NV 89429

Nevada contractor's license number issued by the State Contractor's Board 14299
 Nevada driller's license number issued by the Division of Water Resources, the on site driller 726

Signed [Signature]
 By Driller performing actual drilling on site or contractor
 Date 5/27/94