

OFFICE USE ONLY
 Log No. 214959
 Permit No. _____
 Basin 101

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. 26532

1. OWNER Kapas Construction ADDRESS AT WELL LOCATION 4540 Country Lane
 MAILING ADDRESS _____

2. LOCATION 1/4 Sec 28 T. 19 N/S R. 28 E Churchill County Churchill
 PERMIT NO. _____ Parcel No. Country Lane 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
Brown Sand	✓	0	25	25
Clay		25	37	12
Brown Sand	✓	37	40	3
Black Sand	✓	40	51	11
Black Clay		51	58	7
Grey Clay		58	74	16
Grey Sand	✓	74	107	33
Brown Silt	✓	107	121	14
Black Sand	✓	121	145	24
Brown Sand	✓	145	154	9

8. WELL CONSTRUCTION

Depth Drilled 154 Feet Depth Cased 154 Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet
<u>10</u>	<u>0</u>	<u>50</u>	<u>50</u>
<u>6</u>	<u>50</u>	<u>154</u>	<u>104</u>

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6.75</u>	<u>12.1</u>	<u>.185</u>	<u>0</u>	<u>154</u>

Perforations:
 Type perforation Machine slot
 Size perforation .050

From _____ feet to _____ feet
 From 149 feet to 153 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

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

Depth of Seal 30

Placement Method: Pumped Poured

Gravel Packed: Yes No
 From _____ feet to _____ feet

9. WATER LEVEL

Static water level 13' 9" feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started April 28, 1994
 Date completed April 30, 1994

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>35</u>		<u>1</u>

10. DRILLER'S CERTIFICATION

This well was drilled under my supervision and the report is true to the best of my knowledge.

Name Walsen Contractor
 Address Box 888 Contractor
Fallon

Nevada contractor's license number issued by the State Contractor's Board 11752
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 772

Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date April 30