

OFFICE USE ONLY

Log No. _____
 Permit No. _____
 Basin. **8-103**

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. **25081**

1. OWNER Gene Saccone ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS Scenic Ave _____
Stagecoach, Nevada _____
 2. LOCATION NE 1/4 NW 1/4 Sec. 11 T. 17 N. R. 23 E. Lyon _____ County
 PERMIT NO. 17A | 19-382-08 | _____
 Issued by Water Resources Parcel No. Subdivision Name Stagecoach

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 Mod

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>Sand</u>		<u>7</u>	<u>7</u>	<u>7</u>
<u>Sand, Gravel</u>		<u>7</u>	<u>19</u>	<u>12</u>
<u>Gravel</u>		<u>19</u>	<u>37</u>	<u>18</u>
<u>Gravel, Clay</u>		<u>37</u>	<u>58</u>	<u>21</u>
<u>Gravel, Sand</u>		<u>58</u>	<u>97</u>	<u>39</u>
<u>Gravel, Clay</u>		<u>97</u>	<u>110</u>	<u>13</u>
<u>Gravel</u>		<u>110</u>	<u>141</u>	

APR 21 1994 STATE ENGINEERS OF NV
 JAN 18 1994 STATE ENGINEERS OF NV

8. WELL CONSTRUCTION
 Depth Drilled 141 Feet Depth Cased 142 Feet

HOLE DIAMETER (BIT SIZE)
10 5/8 Inches From 1 Feet To 141 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>10 5/8</u>	<u>13</u>	<u>1.88</u>	<u>1</u>	<u>141</u>

Perforations:
 Type perforation Mill Perf / Torus Perf
 Size perforation 2 1/16 x 3 x 6 nonperf

From 81 feet to 121 feet
 From 121 feet to 141 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: 50
 Placement Method: Pumped Poured

Gravel Packed: Yes No
 From 50 feet to 142 feet

9. WATER LEVEL
 Static water level 43 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature 62 °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 Geach Drilling, Inc Contractor
 Address P.O. 599 Contractor
S.S. W.V., 89409 Contractor
 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 1876
 Signed W. Daniel Geach
 By driller performing actual drilling on site or contractor
 Date 12/16/93

Date started 12/14/93 19____
 Date completed 12/16/93 19____

7. WELL TEST DATA

TEST METHOD:	Bailer	Pump	Air Lift
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)	