

OFFICE USE ONLY  
 Log No. 59280  
 Permit No. 103  
 Basin 1  
 NOTICE OF INTENT NO. 30520

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

1. OWNER HOGGES TRANSPORTATION ADDRESS AT WELL LOCATION SAME  
 MAILING ADDRESS 605 FORT CRUZZCHILL RD.  
SILVER SPRINGS, NV.  
 2. LOCATION SE 1/4 SE 1/4 Sec 26 T. 17 N/S R. 23 E LYON County  
 PERMIT NO. OLD M/R 304-304A Issued by Water Resources Parcel No. 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 AUSER

6. LITHOLOGIC LOG MW-5

Material	Water Strata	From	To	Thick-ness
<u>ON 4/30/96 I</u>	<u>11.8'</u>			
<u>FOUND THE WELL</u>				
<u>TO BE IN GOOD</u>				
<u>CONDITION. AFTER</u>				
<u>REMOVING THE</u>				
<u>COVER I THEN</u>				
<u>DRILLED OUT THE</u>				
<u>2" CASINGS FROM</u>				
<u>0' TO 24'. I</u>				
<u>THEN PRESSURE</u>				
<u>GROUTED THE HOLE</u>				
<u>FROM 24' TO</u>				
<u>SURFACE</u>				

8. WELL CONSTRUCTION  
 Depth Drilled 24' Feet Depth Cased 24' Feet  
 HOLE DIAMETER (BIT SIZE)  
 From To  
6 1/2" Inches 0' Feet 24" Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>2"</u>	<u>40</u>	<u>PVC</u>	<u>0'</u>	<u>24'</u>

Perforations:  
 Type perforation FACTORY  
 Size perforation 020  
 From 10' feet to 24' feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  
 Depth of Seal 24'  Neat Cement  
 Placement Method:  Pumped  Cement Grout  
 Poured  Concrete Grout  
 Gravel Packed:  Yes  No  
 From N/A feet to N/A feet

9. WATER LEVEL  
 Static water level 11.8' feet below land surface  
 Artesian flow NO G.P.M. N/A P.S.I.  
 Water temperature COLD °F Quality N/A

Date started 4/30 19 96  
 Date completed 4/30 19 96

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 type="checkbox"/> Air Lift			
	<u>N/A</u>		

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.  
 Name ANDRESEN EXPLORATION DRILLING Contractor  
 Address 1635 BELARD RD. Contractor  
RENO, NV. 89509  
 Nevada contractor's license number 34525  
 issued by the State Contractor's Board.  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller. 1028  
 Signed [Signature]  
 By driller performing actual drilling on site or contractor  
 Date 6/18/96

RECEIVED  
 96 OCT -9 PM 12:05  
 STATE ENGINEERS OFFICE