

OFFICE USE ONLY  
 Log No. 73969  
 Permit No. \_\_\_\_\_  
 Basin. 02

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. 351627

1. OWNER Tony Postman ADDRESS AT WELL LOCATION (Near Pison)  
 MAILING ADDRESS 8230 Highway 50 Alien/Rancho Drive  
West Sage Coach NV 89129 Over Springs  
 2. LOCATION 1/4 Sec. 33 T. 18 N/S R. 24 County \_\_\_\_\_  
 PERMIT NO. \_\_\_\_\_ 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 \_\_\_\_\_

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Clay Boulder		0	3	3
Boulder Gravel		3	15	12
Gravel Sand		15	315	300
Gravel		315	353	42

8. WELL CONSTRUCTION  
 Depth Drilled 353 Feet Depth Cased 354 Feet  
 HOLE DIAMETER (BIT SIZE)  
 From To  
1 1/8 Inches 1 Feet 50 Feet  
8 1/4 Inches 50 Feet 353 Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>1 1/8</u>	<u>13</u>	<u>1.88</u>	<u>1</u>	<u>353</u>

Perforations:  
 Type perforation Torex cut  
 Size perforation 3/16 x 1/2 x 1/2  
 From 320 feet to 350 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ 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 0 feet to 0 feet

9. WATER LEVEL  
 Static water level 290' feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature C °F Quality Good

Date started 7/3/97, 19\_\_\_\_  
 Date completed 7/4/97, 19\_\_\_\_

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>15 gpm</u>	<u>11m</u>	

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.  
 Name Green Drilling Inc Contractor  
 Address PO 599 Contractor  
SS NV 89429  
 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 [Signature]  
 By driller performing actual drilling on site or contractor  
 Date 7/16/97