

Log No. 76578
 Permit No. _____
 Basin. 105

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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. 42125

1. OWNER AL Benton ADDRESS AT WELL LOCATION 606 Buckskin
 MAILING ADDRESS Box 934 South Lake Tahoe 1392 Buckskin 89410 NV, UV
CA 96156
 2. LOCATION SE 1/4 SW 1/4 Sec 18 T 12 01/2 R 21 E Douglas County
 PERMIT NO. 29-530-06 Ruanstrans Subdivision Name
 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
Sands		0	3	3
Sand, Clay/Slits		0	30	27
Gravels & Clay		30	110	80
Brown Clay		110	165	55
Gravels & Sand	✓	165	210	45
Brown Clay		210	230	20

8. WELL CONSTRUCTION
 Depth Drilled 230 Feet Depth Cased 230' Feet
 HOLE DIAMETER (BIT SIZE)
 From To
12 1/4 Inches 0 Feet 50 Feet
9 7/8 Inches 50 Feet 230 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>+2</u>	<u>170</u>
			<u>210</u>	<u>230</u>

Perforations:
 Type perforation Mill Slot
 Size perforation 3/32
 From 170 feet to 210 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 230 feet

9. WATER LEVEL
 Static water level 1.55 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature Cold °F Quality NA

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name NU Drilling Inc. Contractor
 Address 25 Lewers CR. Rd Carson City Contractor
89704
 Nevada contractor's license number issued by the State Contractor's Board 13697A
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller: 1790
 Signed Ma D By driller performing actual drilling on site or contractor
 Date 5-13-99

Date started May 7 1999
 Date completed May 11 1999

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>Air Lift</u>	<u>20</u>	<u>TOTAL</u>	<u>1.5</u>

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