

OFFICE USE ONLY
 Log No. 79525
 Permit No. 41500
 Basin 58
 NOTICE OF INTENT NO. 17347

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 Dennis Johnson ADDRESS AT WELL LOCATION 71A
 MAILING ADDRESS Box 6305
San Bernardino Cal. 92412
 2. LOCATION NW 1/4 NE 1/4 Sec. 1 T 25 N/S R 48 E Lander County
 PERMIT NO. 41500 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	Thickness
<u>Clay</u>		<u>0</u>	<u>15</u>	
<u>Rock with Gravel Sand</u>		<u>15</u>	<u>40</u>	
<u>Sandy clay & Gravel</u>		<u>40</u>	<u>50</u>	
<u>Rock w/ Gravel</u>		<u>50</u>	<u>210</u>	
<u>Sand</u>		<u>210</u>	<u>250</u>	
<u>Gravel and sand w/ Rock</u>		<u>250</u>	<u>300</u>	
<u>Cemented sand w/ clay</u>		<u>300</u>	<u>415</u>	
<u>Cemented Gravel w/ clay</u>		<u>415</u>	<u>500</u>	
<u>Sand & clay</u>		<u>500</u>	<u>515</u>	
<u>ROCK</u>				

8. WELL CONSTRUCTION
 Depth Drilled 515 Feet Depth Cased 515 Feet
 HOLE DIAMETER (BIT SIZE)
 From To
28 Inches 0 Feet 515 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>16</u>		<u>1250</u>	<u>0</u>	<u>515</u>

Perforations:
 Type perforation Johnson Screen
 Size perforation 100th
 From Blank 0 feet to 200 feet
 From Screen 200 feet to 220 feet
 From 250 feet to 260 feet
 From 320 feet to 360 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 515 feet to 50 feet

9. WATER LEVEL
 Static water level 160 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature cold °F Quality Good

Date started 3-30, 1900
 Date completed 5-1, 1900

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input checked="" type="checkbox"/> Pump <input type="checkbox"/> Air Lift	<u>1000</u>	<u>220'</u>	<u>4</u>

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name American Drillings Contractor
 Address 3040 Callahan WMSA 2K Contractor
89445
 Nevada contractor's license number issued by the State Contractor's Board 0020578
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 730
 Signed Gene Lee Moran
 By driller performing actual drilling on site or contractor
 Date 5-19-00