

Log No. 79931
 Permit No. _____
 Basin 107

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. 40766
NO. 8 Harrison Dr

1. OWNER Phillip Stehno ADDRESS AT WELL LOCATION Smith Valley NV
 MAILING ADDRESS _____
 2. LOCATION NW 1/4 SE 1/4 Sec 20 T. 11 N/S R. 24 E County _____
 PERMIT NO. 10-511-21 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
<u>Sand, Clay</u>		<u>1</u>	<u>6</u>	
<u>Sand</u>		<u>6</u>	<u>23</u>	
<u>Sand</u>		<u>23</u>	<u>34</u>	
<u>Gravel</u>		<u>34</u>	<u>90</u>	
<u>Sand, Clay</u>		<u>90</u>	<u>112</u>	
<u>Gravel</u>		<u>112</u>	<u>125</u>	
<u>Clay Sand</u>		<u>125</u>	<u>160</u>	
<u>Gravel, Sand</u>	<u>X</u>	<u>136</u>	<u>160</u>	

8. WELL CONSTRUCTION
 Depth Drilled 160 Feet Depth Cased 160 Feet

HOLE DIAMETER (BIT SIZE)
 From _____ To _____
10 5/8 Inches _____ Feet 160 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>20</u>
<u>10 5/8</u>	<u>24.6</u>	<u>2.10</u>	<u>20</u>	<u>160</u>

Perforations:
 Type perforation Machine Drift
 Size perforation 3/4" x 5/8" 90' to 160'
 From 145 feet to 153 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 5' Neat Cement
 Placement Method: Pumped Concrete Grout
 Poured

Gravel Packed: Yes No
 From 100 feet to 160 feet

Date started 2/23/00, 19____
 Date completed 2/27/00, 19____

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>35-95</u>	<u>234</u>	<u>1.00</u>

9. WATER LEVEL
 Static water level 36 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature C °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 _____ Contractor
 Address 2080 E. 2nd St Contractor
33 N. 2nd St
 Nevada contractor's license number issued by the State Contractor's Board 0001541
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1270
 Signed _____
 By driller performing actual drilling on site or contractor
 Date 3/2/00