

OFFICE USE ONLY
Log No. 84107
Permit No. _____
Basin 106

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. 45443

1. OWNER Evans L. Alfred ADDRESS AT WELL LOCATION 913 N. Mountain Avenue Run & Highway
St. Casson City Nev. 84703 Melbourn Ave 89404
2. LOCATION SW 1/4 SE 1/4 Sec. 16 T. 10 N. S. R. 22 E. Douglas County
PERMIT NO. 30-060-14 Issued by Water Resources Parcel No. Alfred 80 Acres 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>sandy loam top soil</u>		<u>0</u>	<u>12</u>	<u>12</u>
<u>alluvial large cobbles stones, gravel in broken clay</u>		<u>12</u>	<u>70</u>	<u>58</u>
<u>sharp wates gravel</u>	<u>ms</u>	<u>70</u>	<u>110</u>	<u>40</u>
<u>blue clay</u>		<u>110</u>	<u>118</u>	<u>8</u>
<u>sharp wates gravel some rps</u>	<u>ms</u>	<u>118</u>	<u>180</u>	<u>62</u>

8. WELL CONSTRUCTION
Depth Drilled 180 Feet Depth Cased 180 Feet
HOLE DIAMETER (BIT SIZE)
From 10 Inches 0 Feet 50 Feet
To 6 Inches 50 Feet 180 Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 7/8</u>		<u>1 5/8</u>	<u>0</u>	<u>180</u>

Perforations:
Type perforation Factory Bar Slott
Size perforation 3/32 x 3/160
From 130 feet to 180 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 _____ feet to _____ feet

9. WATER LEVEL
Static water level 70 feet below land surface
Artesian flow _____ G.P.M. _____ P.S.I.
Water temperature Cold 57° Quality good

Date started July 28 01
Date completed Aug 5 01

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>30</u>	<u>75</u>	<u>8 hrs</u>

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name Edmund Miller Drilling Contractor
Address P.O. Box 92 Smith Pl. Contractor
89430
Nevada contractor's license number issued by the State Contractor's Board 32166 A
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 718
Signed Edmund Miller
By driller performing actual drilling on site or contractor
Date Aug 21 01