

OFFICE USE ONLY
 Log No. 84975
 Permit No. _____
 Basin 102
 NOTICE OF INTENT NO. 42078

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 John Bowen ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS _____
 2. LOCATION NW 1/4 SE 1/4 Sec. 18 T. 17 N/S R. 25 E County CLON
 PERMIT NO. _____ Issued by Water Resources _____ Parcel No. 17-3101 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>SAND</u>		<u>0</u>	<u>10</u>	<u>10</u>
<u>SANDY CLAY - GRAY</u>		<u>10</u>	<u>20</u>	<u>10</u>
<u>LAVA ROCK - RED/BLACK</u>		<u>20</u>	<u>65</u>	<u>45</u>
<u>SANDY GRAY CLAY</u>		<u>65</u>	<u>90</u>	<u>25</u>
<u>LAVA ROCK - RED/BLACK</u>		<u>90</u>	<u>130</u>	<u>40</u>

8. WELL CONSTRUCTION
 Depth Drilled 130 Feet Depth Cased 130 Feet
 HOLE DIAMETER (BIT SIZE)
 From 105/8 Inches To 75 Feet
83/4 Inches 75 Feet 130 Feet
 _____ Inches _____ Feet _____ Feet
 CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>65/8</u>		<u>.188</u>	<u>71</u>	<u>130</u>

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Perforations:
 Type perforation Factory milled
 Size perforation 3/32" x 3"
 From 100 feet to 130 feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type:
 Depth of Seal 60 ft Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 60 feet to 130 feet

Date started 4 Oct 2001
 Date completed 5 Oct 2001

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>25+</u>		<u>1.5</u>

9. WATER LEVEL
 Static water level 65 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature COLD °F Quality CLEAR

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name John Drilling & Pump Co.
 P.O. Contractor 255
 Address Clayton, NV 89702
 Contractor
 Nevada contractor's license number 46498
 issued by the State Contractor's Board
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2167
 Signed Jack Dotson
 by driller performing actual drilling on site or contractor
 Date _____