

Log No. 88300
 Permit No. _____
 Basin 102

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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. 49388

1. OWNER Richard Pendleton ADDRESS AT WELL LOCATION 5765 PEEK LOT 36
 MAILING ADDRESS 5765 PEEK
 2. LOCATION SW 1/4 SE 1/4 Sec. 2 T. 17 N/S R. 24 E 11/02 County _____
 PERMIT NO. 17-016-05 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
DIRT-FRACTURED ROCK	6	30	36	20
FRACTURED BROWN ROCK		20	55	35
BROWN CLAY-FRAC ROCK		55	120	65
FRACTURED ROCK		120	210	90
BROWN CLAY-GRAVEL		210	218	8
BLACK FRAC ROCK		218	240	22
BLACK GRAVEL-CLAY		240	250	10
BLACK FRAC ROCK		250	280	30
BLACK & GREEN ROCK		280	340	60
BLACK & GREEN FRAC ROCK		340	400	60

8. WELL CONSTRUCTION
 Depth Drilled 400 Feet Depth Cased 400 Feet
 HOLE DIAMETER (BIT SIZE)
 From To
9 7/8 Inches 0 Feet 250 Feet
8 3/4 Inches 250 Feet 400 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>14</u>	<u>1.88</u>	<u>+1</u>	<u>400</u>

Perforations:
 Type perforation Factory milled / TORCH CUT
 Size perforation 3/32 x 3"
 From 340 feet to 360 feet TC
 From 380 feet to 400 feet FM
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 55 ft Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 55 feet to 400 feet

9. WATER LEVEL
 Static water level 280 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature COLD °F Quality CLEAR

Date started 9 OCT, 2002
 Date completed 16 OCT, 2002

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>15</u>		<u>1.6</u>

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Blain Drilling & Pump Co.
 Address P.O. Box 1255 Carson City, NV 89702
 Nevada contractor's license number issued by the State Contractor's Board 46498
 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 16 OCT 02