

OFFICE USE ONLY
 Log No. 58860
 Permit No. 108
 Basin 108

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. **42235**

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

1. OWNER **Nevada Division of Wildlife**
 MAILING ADDRESS **1100 Valley Road**
Reno, NV 89512-2817

ADDRESS AT WELL LOCATION **West side of Bybee Lane,**
Yerington, NV.

2. LOCATION **NE** 1/4 **NE** 1/4 Sec. **15** T **14N** N/S R **26E** E **Lyon** County

PERMIT NO. **17364** 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
Removed 130' of 6" turbine pump from well. Measured static water level at 15' and depth of well at 156'. Bailed well but could not retrieve any debris. Installed 12" Mills Knife to 57' and perforated 5 rows per foot back up to surface. Installed 152' of 2" tremmie pipe and pumped in 7 cubic yards of neat cement from bottom of well to surface. Cement weight was 15.6 lbs. per gallon.				
PLUGGING OF WELL LOG # 5868				
STATE ENGINEERS OFFICE				

8. WELL CONSTRUCTION
 Depth Drilled **158** Feet Depth Cased **158** Feet

HOLE DIAMETER (BIT SIZE)
 From _____ To _____
 Inches _____ Feet _____ Feet
 Inches _____ Feet _____ Feet
 Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
12"		.188	+1	158'

Perforations:
 Type perforation _____
 Size perforation _____

From _____	=1	feet to _____	158'	feet
From _____		feet to _____		feet
From _____		feet to _____		feet
From _____		feet to _____		feet
From _____		feet to _____		feet

Surface Seal: Yes No Seal Type:
 Depth of Seal **158'** Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout

Gravel Packed: Yes No
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level **15'** feet below land surface
 Artesian flow _____ G.P.M. P.S.I.
 Water temperature _____ °F Quality _____

Date started **04/10/2003**, 19
 Date completed **04/14/2003**, 19

7. WELL TEST DATA

TEST METHOD:	TEST METHOD:		Time (Hours)
	G.P.M.	Draw Down (Feet Below Static)	
<input type="checkbox"/> Bailor			
<input type="checkbox"/> Pump			
<input type="checkbox"/> Air Lift			

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.

Name **Carson Pump** Contractor
 Address **P.O. Box 20159** Contractor
Carson City, NV. 89721
 Nevada contractor's license number issued by the State Contractor's Board **39920**
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1482**

Signed *Dave Tramp*
 By driller performing actual drilling on-site or contractor
 Date **04/15/2003**