

OFFICE USE ONLY
 Log No. 89380
 Permit No. _____
 Basin 103

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. 49348

1. OWNER Howe Const ADDRESS AT WELL LOCATION 305 ROSOSI DAYTON, NV LYON
 MAILING ADDRESS _____
 2. LOCATION SE 1/4 SW 1/4 Sec. 4 T 16 N/S R. 22 E County LYON
 PERMIT NO. 116-293-05 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	Thick-ness
<u>SAND</u>		<u>0</u>	<u>8</u>	<u>8</u>
<u>BROWN CLAY</u>		<u>8</u>	<u>18</u>	<u>10</u>
<u>SAND-CLAY</u>		<u>18</u>	<u>40</u>	<u>42</u>
<u>GRAVEL-BROWN CLAY</u>		<u>60</u>	<u>180</u>	<u>120</u>
<u>GRAVEL</u>		<u>180</u>	<u>220</u>	<u>40</u>

8. WELL CONSTRUCTION
 Depth Drilled 220 Feet Depth Cased 220 Feet
 HOLE DIAMETER (BIT SIZE)
 From 9 7/8 Inches To 0 Feet 220 Feet
 _____ Inches _____ Feet _____ 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>.188</u>	<u>+1</u>	<u>220</u>

Perforations:
 Type perforation Factory milled
 Size perforation 3/32" x 3"
 From 200 feet to 220 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 50 ft Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 50 feet to 220 feet

9. WATER LEVEL
 Static water level 72 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature COLD F Quality CLEAR

Date started 10 NOV, 2002
 Date completed 12 NOV, 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>25+</u>		<u>1.0</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.
P.O. Box 1255
 Address Carson City, NV 89702 Contractor
 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 Rotun
 By driller performing actual drilling on site or contractor
 Date _____