

OFFICE USE ONLY
 Log No. 92721
 Permit No. _____
 Basin 105

T

53483

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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. 53483

1. OWNER Swift Const. ADDRESS AT WELL LOCATION 609 FRONTAGE RD
 MAILING ADDRESS _____
 2. LOCATION SE 1/4 SW 24 T. 12 N/S R. 20 E Douglas County
 PERMIT NO. 11220-24-410-0110 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
DIRT-ROCK		0	8	8
SANDY CLAY		8	14	6
COBBLES		14	55	41
FRACTURED ROCK	X	55	106	51
STREAKY GRAVEL-ROK		106	146	40
MEDIUM GRAVEL	X	146	200	54

8. WELL CONSTRUCTION
 Depth Drilled 200 Feet Depth Cased 200 Feet

HOLE DIAMETER (BIT SIZE)
 From 105/8 Inches To 200 Feet
 _____ Inches _____ Feet
 _____ Inches _____ 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>41</u>	<u>200</u>

Perforations:
 Type perforation Factory milled/TORCH CUT
 Size perforation 3/32" X 3"

From _____ feet to _____ feet
 From 140 feet to 180 feet TC
 From 180 feet to 200 feet FM
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 103 ft Neat Cement
 Placement Method: Pumped Concrete Grout
 Poured

Gravel Packed: Yes No
 From 103 feet to 200 feet

9. WATER LEVEL
 Static water level 108 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 BLAIN DRILLING & PUMP CO. INC.
 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 Watson
 By driller performing actual drilling on site or contractor
 Date _____

Date started 16 MAR 04
 Date completed 18 MAR 04

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>10-12</u>		<u>1.0</u>

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