



Log No. 95773

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. 52757

1. OWNER Dan Caven ADDRESS AT WELL LOCATION 3705 Aspen St
 MAILING ADDRESS _____ Silver Springs, Nv.
 2. LOCATION NE 1/4 SE 1/4 Sec 2 T 17 N/S R 24 E Lyon County
 PERMIT NO. 17-013-04 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 RVE
 Air Other well

6. LITHOLOGIC LOG

| Material | Water Strata | From | To | Thick-ness |
|-----------------------|--------------|------------|------------|------------|
| <u>Soil</u> | | <u>0</u> | <u>4</u> | |
| <u>boulders</u> | | <u>4</u> | <u>62</u> | |
| <u>Cemented sands</u> | | <u>62</u> | <u>168</u> | |
| <u>Thin clay</u> | | <u>168</u> | <u>205</u> | |
| <u>Coarse clay</u> | | <u>205</u> | <u>258</u> | |
| <u>Coarse sands</u> | | <u>258</u> | <u>300</u> | |

8. WELL CONSTRUCTION
 Depth Drilled 300 Feet Depth Cased 300 Feet

HOLE DIAMETER (BIT SIZE)

| Inches | From | To |
|---------------|-----------|------------|
| <u>10 7/8</u> | <u>0</u> | <u>60</u> |
| <u>8 3/4</u> | <u>60</u> | <u>300</u> |

CASING SCHEDULE

| Size O.D. (Inches) | Weight/Ft. (Pounds) | Wall Thickness (Inches) | From (Feet) | To (Feet) |
|--------------------|---------------------|-------------------------|-------------|------------|
| <u>6 5/8</u> | <u>1300</u> | <u>3/16</u> | <u>0</u> | <u>70</u> |
| <u>6 5/8</u> | <u>3000</u> | <u>5/16</u> | <u>70</u> | <u>300</u> |

Perforations:
 Type perforation seal saw
 Size perforation _____
 From 60 feet to 300 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout

Depth of Seal 0-50

Placement Method: Pumped
 Poured

Gravel Packed: Yes No
 From 50 feet to 300 feet

9. WATER LEVEL
 Static water level 145 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality good

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

Name High Drilling Inc Contractor
 Address PO Box 599 Contractor
Silver Springs Nv. 89429

Nevada contractor's license number 0031841
 issued by the State Contractor's Board

Nevada driller's license number issued by the Division of Water Resources, the on-site driller 11377

Signed Michael Caven
 By driller performing actual drilling on site or contractor

Date 10-3-04

Date started 10-2-04
 Date completed 10-3-04

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

| G.P.M. | Draw Down (Feet Below Static) | Time (Hours) |
|-----------------------|-------------------------------|--------------|
| <u>Produced about</u> | <u>15 to 20</u> | <u>6 PM</u> |

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