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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. 43209

1. OWNER Kenny Carter ADDRESS AT WELL LOCATION 2800 N 45 W Lot 64
 MAILING ADDRESS Po Box 151836 Cross Timbers Subdivision
ELY NV 89315
 2. LOCATION N.W. 1/4 SW 15 T 17 N/S R 63 E White Pine County
 PERMIT NO. N/A Issued by Water Resources Parcel No. _____ Subdivision Name Cross Timbers

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
Sandy Clay top Soil		0	4	
gravel clay con.		4	25	
Clay gravel con.		25	40	
gravel clay con.		40	45	
Clay conglomerate		45	48	
gravel clay con.		48	50	
Clay gravel con		50	62	
gravel con		62	67	
Clay gravel con		67	100	
gravel	water	100	101	1
Clay con		101	110	
Sandy clay		110	116	
gravel	water	116	117.5	1.5
Sandy clay		117.5	125	
gravel	water	125	125.5	.5
Clay conglomerate		125.5	143	
gravel	water	143	144	1
Sandy clay		144	151	
gravel	water	151	160	9

8. WELL CONSTRUCTION
 Depth Drilled 160 Feet Depth Cased 160 Feet
 HOLE DIAMETER (BIT SIZE)

Inches	From	To
<u>10</u>	0	50
<u>8</u>	50	160

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6</u>	<u>12.9</u>	<u>1.88</u>	<u>1</u>	<u>69</u>
<u>6</u>		<u>Sch 40</u>	<u>19</u>	<u>160</u>

Perforations:
 Type perforation mill
 Size perforation .032" x 6 row
 From 100 feet to 160 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout
 Depth of Seal 50
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From 50 feet to 160 feet

9. WATER LEVEL
 Static water level 92 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature cold °F Quality good

Date started Sept 13 2005
 Date completed Oct 5 2005

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>30</u>	<u>1</u>	<u>1 hr</u>

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Maynard Well Drilling Contractor
 Address Po Box 64 Lund NV 89317 Contractor
 Nevada contractor's license number issued by the State Contractor's Board 047224
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1556
 Signed Quinn Maynard
 By driller performing actual drilling on site or contractor
 Date Oct 31 - 2005