Send original copy by certified return receipt request mail to: TDLR, P.O. Box 12157, Austin, TX 78711

ATTENTION OWNER: *Confidentiality Privilege Notice on reverse side of Well Owner's copy (pink)*

# State of Texas
# WELL REPORT

Texas Department of Licensing & Regulation
P.O. Box 12157
Austin, TX 78711
512-463-7880

1) OWNER GORDON DANZ (Name) ADDRESS P.O. BOX 355 (Street or RFD) MASON (City) TEXAS (State) 76856 (Zip)

2) ADDRESS OF WELL'S LOCATION: 2 MILES E. ON HWY 29 FROM HWY 87 TURN LEFT ONTO OLD PONTOTOC RD. GO 1 MILE TURN RT. GO 2.5 MI. TURN RT GO 1/4 ON THE RIGHT (Street, RFD or other) (City) MASON (State) TX (Zip) 76856 Long: Lat. Grid # 56-15-9

County MASON

3) TYPE OF WORK (Check): ☒ New Well ☐ Deepening ☐ Reconditioning ☐ Plugging

4) PROPOSED USE (Check): ☐ Monitor ☐ Environmental Soil Boring ☒ Domestic ☐ Industrial ☐ Irrigation ☐ Injection ☐ Public Supply ☒ Dewatering ☐ Testwell
If Public Supply well, were plans submitted to the TNRCC? ☐ Yes ☐ No

5)

6) WELL LOG:
Date Drilling:
Started 11-24 19 98
Completed 11-24 19 98

DIAMETER OF HOLE

| Dia. (in.) | From (ft.) | To (ft.) |
|---|---|---|
| 8 & 5 1/2 | Surface | 17 |
| 5 1/2 | 17 | 85 |

7) DRILLING METHOD (Check): ☐ Driven ☒ Air Rotary ☐ Mud Rotary ☐ Bored ☒ Air Hammer ☐ Cable Tool ☐ Jetted ☐ Other

| From (ft.) | To (ft.) | Description and color of formation material |
|---|---|---|
| 0 | 2 | TOPSOIL |
| 2 | 6 | RED GRANITE |
| 6 | 9 | GRAVEL & RED CLAY |
| 9 | 11 | RED GRANITE |
| 11 | 13 | GRAVEL & GRAY CLAY |
| 13 | 20 | RED GRANITE STRINGERS |
| | | GRAVEL |
| 20 | 85 | BROKEN GRANITE |

(Use reverse side of Well Owner's copy, if necessary)

8) Borehole Completion (Check): ☒ Open Hole ☐ Straight Wall ☐ Underreamed ☐ Gravel Packed ☐ Other
If Gravel Packed, give interval from ft. to ft.

CASING, BLANK PIPE, AND WELL SCREEN DATA:

| Dia. (in.) | New or Used | Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial | Setting (ft.) From | Setting (ft.) To | Gage Casing Screen |
|---|---|---|---|---|---|
| 5 | N | PVC | 0 | 17 | |

9) CEMENTING DATA
Cemented from 0 ft. to 17 ft. No. of sacks used 1
ft. to ft. No. of sacks used
Method used SLURRY
Cemented by L. MURCHISON
Distance to septic system field lines or other concentrated contamination NA ft.
Method of verification of above distance

10) SURFACE COMPLETION
☐ Specified Surface Slab Installed
☒ Specified Steel Sleeve Installed
☐ Pitless Adapter Used
☐ Approved Alternative Procedure Used

11) WATER LEVEL:
Static level 13 ft. below land surface Date 11-24-98
Artesian flow gpm. Date

12) PACKERS: Type Depth

13) ☐ Well plugged within 48 hours

| Casing left in well: From (ft) | Casing left in well: To (ft) | Cement/bentonite placed in well: From (ft) | Cement/bentonite placed in well: To (ft) | Sacks used: |
|---|---|---|---|---|
| | | | | |
| | | | | |

14) TYPE PUMP:
☐ Turbine ☐ Jet ☐ Submersible ☐ Cylinder ☐ Other
Depth to pump bowls, cylinder, jet, etc., ft.

15) WELL TESTS:
Type test: ☐ Pump ☐ Bailer ☐ Jetted ☒ Estimated
Yield: 80 gpm with ft. drawdown after hrs.

16) WATER QUALITY:
Did you knowingly penetrate any strata which contained undesirable constituents?
☐ Yes ☒ No If yes, submit "REPORT OF UNDESIRABLE WATER"
Type of water? Depth of strata
Was a chemical analysis made? ☐ Yes ☒ No

I certify that I drilled this well (or the well was drilled under my direct supervision) and that each and all of the statements herein are true and correct. I understand that failure to complete items 1 thru 16 will result in the log(s) being returned for completion and resubmittal.

COMPANY NAME HIGHLAND DRILLING, INC. (Type or print) WELL DRILLER'S LICENSE NO. 46621

ADDRESS 309 FRAZIER (Street or RFD) TOW (City) TEXAS (State) 76872 (Zip)

(Signed) (Licensed Well Driller) (Signed) (Registered Driller Trainee)

FILE ID SEQ #
EMP # JAN 1999
COMMENT

Please attach electric log, chemical analysis, and other pertinent information, if available.

TDLR FORM 001WWD (4/98) White - TDLR Yellow - DRILLER Pink - WELL OWNER