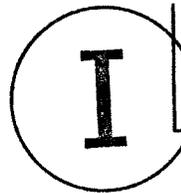


STATE OF NEVADA
DIVISION OF WATER RESOURCES
WELL DRILLER'S REPORT



OFFICE USE ONLY

Log No. 101699

Permit No. _____

Basin 049

PRINT OR TYPE ONLY
NOT WRITE ON BACK

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. 56176

1. OWNER Christopher Paiano
MAILING ADDRESS 1346 Idaho Street
Elko, NV 89801

ADDRESS AT WELL LOCATION 3571 Pueblo Ave

Subdivision Name: 40,90399 County: Elko

2. LOCATION NW 1/4 SW 1/4 Sec 19 T 35N N/S R 56 E
PERMIT/WAIVER No. 036-021-001
Issued by Water Resources Parcel No. _____

Latitude 40.9399N UTM E NAD 27
Longitude 115.71569.W N NAD 83/WGS 84

3. WORKED PERFORMED
 New Well Replace Recondition
 Deepen 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 Loam		0	6	6
Hard Sandstone		6	8	2
Brown Clay		8	115	107
Hard Sandstone		115	117	2
Brown Clay		117	149	32
Hard Sandstone		149	151	2
Brown Clay		151	215	64
Sand & Gravel	X	215	260	45

9. WELL CONSTRUCTION				
Depth Drilled	260	Feet	Depth Cased	260
HOLE DIAMETER (BIT SIZE)				
	From	To		
10	0	260	Feet	Feet
			Feet	Feet
			Feet	Feet

CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6	12.92	188	+2	20
6		SDR-21	20	260

Date started: 20 Aug, 20 06
Date completed: 30 Aug, 20 06

Perforations:
Type of perforation Screen
Size of perforation 0.032
From 220 feet to 260 feet
From _____ feet to _____ feet

Annular Seal: Yes No
 Neat Cement 0 to 19 Pumped Poured
 Cement Grout _____ to _____ Pumped Poured
 Concrete Grout _____ to _____ Pumped Poured
 ≥30% Bentonite Grout 19 to 51 Pumped Poured

Gravel Pack: Yes No 51 to 260 Pumped Poured
Type: 3/8 PEA GRAVE
Bentonite Chips: Yes No _____ to _____ Pumped Poured
Type: _____

7. Water Level
Static water level: 180 feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: cold °F
Quality: _____

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name SHAREL C. FERTIG SR. dba FERTIG DRILLING COMPANY
Contractor
Address P.O. BOX 525
Contractor
ELKO, NV 89803
Nevada contractor's license number
issued by the State Contractor's Board 031904
Nevada driller's license number issued by the
Division of Water Resources, the on-site driller 1584
Signed Sharel C. Fertig
By driller performing actual drilling on site or contractor
Date 9-29-06

8. WELL TEST DATA			
TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailor <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift			
APPROX	65		4.5