

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

OFFICE USE ONLY
 Log No. 103730
 Permit No. _____
 Basin 071

PRINT OR TYPE ONLY

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

NOTICE OF INTENT NO. 59482

1. OWNER **Magno Garavito** ADDRESS AT WELL LOCATION **15660 Grass Valley Road**
 MAILING ADDRESS **15660 Grass Valley Road** **Winnemucca, NV 89445**
 NE SE **Subdivision Name:** _____ **County: Pershing**

2. LOCATION **SE 1/4 NW 1/4 Sec 29 T34 N/S R38E** Latitude **N40°47.359** UTM E NAD 27
 PERMIT/WAIVER NO. **009-280-20** Longitude **W117°43.319** N NAD 83/WGS 84
Issued by Water Resources Parcel No. _____

3. WORK 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	Thick-ness
Topsoil		0	2	2
boulders		2	15	13
cobles clay		15	95	70
rock ledge		95	113	18
cobles & clay		113	120	7
rock ledge		120	160	40
cobles		160	170	10
hard rock		170	180	10
boulders		180	185	5
hard rock		185	200	15
clay rock		200	205	5
hard rock		205	215	10
fractured rock		215	225	10
cobles/clay sand		225	240	15
gravel & sand cobles	x	240	260	20
boulders		260	265	5
cobles & fine sand		265	275	10
hard rock		275	285	10
fractured rock w/clay	x	285	290	5
sand cobles	x	290	310	20
hard rock		310	317	7

9. WELL CONSTRUCTION

Depth Drilled **317** Feet Depth Cased **317** Feet

HOLE DIAMETER (BIT SIZE)

From _____ To _____

10 5/8 Inches **0** Feet **317** Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	10	1.88	+1	20
6.625	4.06	.316	20	317

Perforations:

Type of perforation **Factory Cut**

Size of perforation **050**

From **257** feet to **277** feet
 From **297** feet to **317** feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Annular Seal: Yes No

Neat Cement 5 to 50 Pumped Poured
 Cement Grout _____ to _____ Pumped Poured
 Concrete Grout _____ to _____ Pumped Poured
 ≥30% Bentonite Grout _____ to _____ Pumped Poured
 Gravel Pack: Yes No 50 to 317 Pumped Poured
 Type: _____
 Bentonite Chips: Yes No _____ to _____ Pumped Poured
 Type: _____

Date started: **March 29, 2007**
 Date completed: **April 6, 2007**

7. Water Level

Static water level: **240** feet below land surface

Artesian Flow: **N/A** G.P.M. **N/A** P.S.I

Water Temperature: **Cool** °F

Quality: **Good**

8. WELL TEST DATA

TEST METHOD:	<input type="checkbox"/> Bailer	<input checked="" type="checkbox"/> Pump	<input type="checkbox"/> Air Lift
	Draw Down (Feet Below Static)		Time (Hours)
G.P.M.	15		10
	N40.789426		
	W117.221018		
	NAD27		

10. DRILLER'S CERTIFICATION

This well was drilled under my supervision and the report is true to the best of my knowledge.

Name **Fred Anderson Drilling, Inc.** (CONTRACTOR)
 Address **10760 S. Grass valley Road** (CONTRACTOR)
Winnemucca, NV 89445
 Nevada contractor's license number issued by the State Contractor's Board **021467**
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **2083**

Signed 
 By driller performing actual drilling on site or contractor
 Date **April 17, 2007**