

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

OFFICE USE ONLY

Log No. 103126
 Permit No. _____
 Basin 101

PRINT OR TYPE ONLY
 DO 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. 57497

1. OWNER Great Basin College Foundation ADDRESS AT WELL LOCATION 275 West Williams Ave - Fallon NV
 MAILING ADDRESS P.O. Box 2656 Eiko NV 89801

2. LOCATION ~~NE~~ NE ~~SW~~ SW $\frac{1}{4}$ Sec. 36 T. 19 S. R. 28 E. Churchill County
 PERMIT NO. NDEPT 5-000024 001-532-07 Parcel No. N/A 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 RVC
 Air Other _____

6. LITHOLOGIC LOG MW 6

Material	Water Strata	From	To	Thick-ness
<u>brown clayey sand</u>		<u>0</u>	<u>2</u>	<u>2</u>
<u>brown sandy clay</u>		<u>2</u>	<u>5</u>	<u>5</u>
<u>brown fine sand</u>	<u>8'</u>	<u>7</u>	<u>19</u>	<u>12</u>
<u>GPS</u>				
<u>N 39° 28.479'</u>				
<u>W 118° 46.793'</u>				
<u>N 39.474750</u>				
<u>W 118.774907 NAD27</u>				

8. WELL CONSTRUCTION
 Depth Drilled 19 Feet Depth Cased 19 Feet

HOLE DIAMETER (BIT SIZE)
 From 0 To 19
8.5 Inches 0 Feet 19 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>2" PVC</u>		<u>sch 40</u>	<u>0</u>	<u>19</u>

Perforations:
 Type perforation slotted screened
 Size perforation 0.010 inch
 From 4 feet to 19 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 0-2' (Centarite 1-2') Neat Cement
 Placement Method: Pumped Concrete Grout
 Poured

Gravel Packed: Yes No
 From 2 feet to 19 feet

9. WATER LEVEL
 Static water level 8' feet below land surface
 Artesian flow NO G.P.M. _____ P.S.I. _____
 Water temperature WARM °F Quality MURKY

Date started 1-31-07
 Date completed 1-31-07

7. N/A WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
	<u>42:01</u>	<u>5</u>

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name DALE A. LEHMAN Contractor
 Address 520 Edison Way Reno NV 89502 Contractor
 Nevada contractor's license number issued by the State Contractor's Board C.E. 4186
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller M-1976
 Signed Dale A. Lehman
 By driller performing actual drilling on site or contractor
 Date 2-1-07