



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

OFFICE USE ONLY
Log No. 103836
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. 59556

1. OWNER C.S.E. CONSTRUCTION ADDRESS AT WELL LOCATION 4130 SANTA FE
MAILING ADDRESS 5083 RENO HWY FALLON, NV 89406
FALLON, NV 89406 Subdivision Name: _____ County: CHURCHILL

2. LOCATION SE 1/4 SE 1/4 Sec 28 T 19N N/S R 28 E Latitude 39° 28.663N UTM E NAD 27
PERMIT/WAIVER No. 008-401-28 Longitude 118° 50.345W N NAD 83/WGS 84
Issued by Water Resources Parcel No. _____

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	Thick-ness
TOP SOIL		0	1	1
BROWN SAND		1	14	13
BROWN CLAY		14	17	3
BROWN SAND		17	35	18
GRAY SANDS		35	60	25
GRAY CLAY		60	70	10
BROWN SANDS		70	88	18
BROWN CLAY		88	93	5
GRAY SANDS		93	150	57
BROWN CLAY		150	160	10
BROWN SANDS	X	160	170	10

N39.477817
W 118.838105 NAD27

2007 JUN 2 AM 11:06

9. WELL CONSTRUCTION

Depth Drilled	Feet	Depth Cased	Feet
<u>170</u>		<u>170</u>	

HOLE DIAMETER (BIT SIZE)

	From	To		
<u>10 3/4</u>	<u>0</u>	<u>100</u>	Inches	Feet
<u>6</u>	<u>100</u>	<u>170</u>	Inches	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 5/8</u>	<u>12.9</u>	<u>.188</u>	<u>+2</u>	<u>170</u>

Perforations:

Type of perforation MACHINE SLIT
Size of perforation .080

From 162 feet to 167 feet
From _____ feet to _____ feet

Annular Seal: Yes No

Neat Cement to _____ Pumped Poured
 Cement Grout to _____ Pumped Poured
 Concrete Grout to 100 Pumped Poured
 ≥30% Bentonite Grout to _____ Pumped Poured

Gravel Pack: Yes No to _____ Pumped Poured

Type: _____
Bentonite Chips: Yes No to _____ Pumped Poured
Type: _____

Date started: 10-May, 2007
Date completed: 28-May, 2007

7. Water Level
Static water level: 17'6" feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: COOL °F
Quality: UNTESTED

8. WELL TEST DATA

TEST METHOD: Bailor Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>25</u>		<u>1 HOUR</u>

10. DRILLER'S CERTIFICATION

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

Name WELSCO CORP. Contractor
Address P. O. BOX 888 Contractor
FALLON, NV 89406

Nevada contractor's license number issued by the State Contractor's Board 11752
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2199

Signed [Signature]
By driller performing actual drilling on site or contractor

Date 18-Jun-07