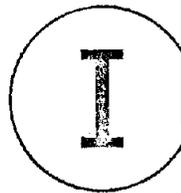


STATE OF NEVADA
DIVISION OF WATER RESOURCES
WELL DRILLER'S REPORT



OFFICE USE ONLY
Log No. 104485
Permit No. _____
Basin 249

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. 60670

1. OWNER Dale & Ted Boyce ADDRESS AT WELL LOCATION 4700 Wickup Street Hwy 37/Modoc Ave
MAILING ADDRESS 523 MVR #11 Block 1, Lot 8
Elko, NV 89801 Subdivision Name: _____ County: Elko

2. LOCATION NE 1/4 NE 1/4 Sec 19 T 35N N/S/R 56 E Latitude 40.54.727N UTM E NAD 27
PERMIT/WAIVER No. 73265 036-001-202 cc 3 Longitude 115.42.124W 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
Loam		0	2	2
Cemented Gravel		2	55	53
Clay		55	79	24
Cemented Gravel		79	118	39
Clay		118	124	6
Cemented Gravel		124	168	44
Clay		168	181	13
Cemented Gravel		181	235	54
Clay		235	264	29
Cemented Gravel	X	264	265	1
Clay		265	310	45
Hard Rock		310	320	10
Clay		320	365	45
Gravel & Sand	X	365	367	2
Clay		367	375	8
Gravel & Sand	X	375	380	5

9. WELL CONSTRUCTION
Depth Drilled 380 Feet Depth Cased 380 Feet
HOLE DIAMETER (BIT SIZE)
From 0 To 380
10 5/8 inches _____ Feet _____ Feet
_____ inches _____ Feet _____ Feet
_____ inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6	12.92	188	+3	380

Perforations:
Type of perforation Mill Slot
Size of perforation 3/16 x 3"
From 280 260 feet to 280 250 feet
From 360 feet to 380 feet
From _____ feet to _____ feet
From _____ feet to _____ feet

Annular Seal: Yes No
 Neat Cement _____ to _____ Pumped Poured
 Cement Grout _____ to _____ Pumped Poured
 Concrete Grout 0 to 56 Pumped Poured
 ≥30% Bentonite Grout _____ to _____ Pumped Poured
Gravel Pack: Yes No 56 to 380 Pumped Poured
Type: 3/8 PEA GRAVE
Bentonite Chips: Yes No _____ to _____ Pumped Poured
Type: _____

Date started: 9-Sep , 20 07
Date completed: 11-Sep , 20 07

7. Water Level
Static water level: 196 feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: cold °F
Quality: _____

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 type="checkbox"/> Air Lift			
APPROX	200		

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 9-21-07