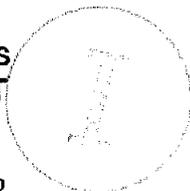


STATE OF NEVADA
DIVISION OF WATER RESOURCES
WELL DRILLER'S REPORT



OFFICE USE ONLY
Log No. 105118
Permit No. _____
Basin Ø42

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. 60685

1. OWNER Gary Botts ADDRESS AT WELL LOCATION 12 Miles East of Wells's Nevada
MAILING ADDRESS P.O. Box 217 NW
SE Wells, NV 89835 Subdivision Name: _____ County: Elko
2. LOCATION NE 1/4 SE 1/4 Sec 23 T 39N N/S R 61 E Latitude 41.14.862N UTM E NAD 27
PERMIT/WAIVER No. _____ Longitude 115.02.630W 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	Thickness
Top soil		0	30	30
Light Gravel		30	40	10
Fine Sand	X	40	50	10
Hardpan		50	65	15
Find Sand & Gravel	X	65	70	5
Soft fine Sand	X	70	110	40
Hardpan		110	115	5
Broken Sandstone	X	115	125	10
Blowed well 4 hrs to clean fine sand out of gravel				
<u>N41.247793</u>				
<u>W 115.042939 NAD83</u>				

9. WELL CONSTRUCTION

Depth Drilled 125 Feet Depth Cased 125 Feet

HOLE DIAMETER (BIT SIZE)

From	To
<u>10 5/8</u> inches	<u>0</u> Feet <u>125</u> Feet
_____ inches	_____ Feet _____ Feet
_____ inches	_____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6</u>	<u>12.92</u>	<u>188</u>	<u>+1</u>	<u>25</u>
<u>6</u>	<u>8</u>	<u>SDR-17</u>	<u>25</u>	<u>125</u>

Perforations:

Type of perforation Screen
Size of perforation 0.32 10/32

From	to
<u>105</u>	<u>125</u>
_____	_____
_____	_____
_____	_____
_____	_____

Annular Seal: Yes No

Material	to	Method
<input type="checkbox"/> Neat Cement	_____	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
<input type="checkbox"/> Cement Grout	_____	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
<input checked="" type="checkbox"/> Concrete Grout	<u>0</u> to <u>20</u>	<input type="checkbox"/> Pumped <input checked="" type="checkbox"/> Poured
<input type="checkbox"/> ≥30% Bentonite Grout	_____	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured

Gravel Pack: Yes No 51 to 125 Pumped Poured
Type: 3/8 PEA GRAVE

Bentonite Chips: Yes No 20 to 51 Pumped Poured
Type: 3/8 Kink Plug

7. Water Level
Static water level: 40 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"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift			
<u>APPROX</u>	<u>80</u>		<u>16.5</u>

10. DRILLER'S CERTIFICATION

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

Name 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 12-13-07