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WELL DRILLER'S REPORT

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

NOTICE OF INTENT NO. **59144**

1. OWNER **Model T Casino** ADDRESS AT WELL LOCATION **Model T Casino**
 MAILING ADDRESS **1130 W. Winnemucca Blvd., Winnemucca, NV.** **1130 W. Winnemucca Blvd., Winnemucca, NV.**
 2. LOCATION **SE NW ¼, SW SE ¼ Sec. 30 T 36 R 38 E Humboldt** County
 PERMIT NO **Fact # 5-000114** Parcel No. **015-282-09** Subdivision Name _____
Issued by Water Resources

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 **ASA**

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Asphalt		0	2"	2"
Silty sand		2"	1 1/2'	16"
Silty sand/gravelly sand		1 1/2'	14'	12.5'
Sandy silt	18'	14'	38'	24'
NAD 83				
Easting 2856419.65				
Northing 15387205.76				
NAD 83 40 964395				
NAD 83 40 964395				
NAD 83 40 964395				
ASP-7				

8. WELL CONSTRUCTION
 Depth Drilled **38'** Feet Depth Cased **38'** Feet
 HOLE DIAMETER (BIT SIZE)
 8 1/2" Inches From 0 Feet To 38' Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet
 CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
3/4"		Sch. 40	0	36'

 Perforations:
 Type perforation **Factory Slot**
 Size perforation **.020**
 From **34'** feet to **36'** feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type:
 Depth of Seal **32 1/2'** Neat Cement
 Placement Method: Pumped Cement Grout
 Poured **33' 28' Bentonite** Concrete Grout
 Gravel Packed: Yes No
 From **36'** feet to **33'** feet

Date started **5-16-08**, 20____
 Date completed **5-16-08**, 20____

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift			

9. WATER LEVEL
 Static water level **18'** feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature **68.5°** °F Quality _____

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name **Haz-Tech Drilling Inc.** Contractor
 Address **P.O. Box 490 Meridian, ID 83642** Contractor
 Nevada contractor's license number **0038018** issued by the State Contractor's Board
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **M-2188**
 Signed **Mike** By driller performing actual drilling on site or contractor
 Date **5-20-08**