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

OFFICE USE ONLY
Log No. 107432
Permit No.
Basin 131

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. 62680

1. OWNER Joe Savanha Corp.
MAILING ADDRESS P.O. Box 356
Battle Mtn, NV 89820

ADDRESS AT WELL LOCATION Electric Well
Buffalo Valley, NV
Subdivision Name: County: Lander

2. LOCATION se ¼ sw ¼ Sec 4 T 29N N/S R 42 E
PERMIT/WAIVER No. 44752 (Issued by Water Resources) Parcel No.

Latitude 40.40848N
Longitude -117.26332W
UTM E N
☐ NAD 27 ☒ NAD 83/WGS 84

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
Sand		80	88	8
Rock		88	110	22

N40.408567
W117.262379 NAD27

no original well log on file

9. WELL CONSTRUCTION
Depth Drilled 110 Feet Depth Cased 110 Feet

HOLE DIAMETER (BIT SIZE)

		From		To	
6 1/4	Inches	80	Feet	110	Feet
	Inches		Feet		Feet
	Inches		Feet		Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
5 9/16	10.8	.188	70	110

Perforations:
Type of perforation Mill Cut
Size of perforation 1/8"
From 110 feet to 90 feet
From feet to feet
From feet to 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 to ☐ 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: 22-Oct, 20 08
Date completed: 23-Oct, 20 08

7. Water Level
Static water level: 48 feet below land surface
Artesian Flow: G.P.M. P.S.I.
Water Temperature: cool °F
Quality: unknown

8. WELL TEST DATA
TEST METHOD: ☐ Bailer ☐ Pump ☒ Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
25		2

STATE ENGINEERS OFFICE
2008 NOV 13 AM 11:41
RECEIVED

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name Parsons Drilling, Inc. (Contractor)
Address P.O. Box 1265 (Contractor)
Fallon, NV 89407-1265
Nevada contractor's license number issued by the *State Contractor's Board* 29064
Nevada driller's license number issued by the Division of Water Resources, the *on-site driller* 2307
Signed (By driller performing actual drilling on site or contractor)
Date 10/28/2008

(Rev. 05-06)

USE ADDITIONAL SHEETS IF NECESSARY