

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

3

OFFICE USE ONLY

Log No. _____

Permit No. _____

Basin Ø87

NOTICE OF INTENT NO. 63446

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

1. OWNER SFPP, L.P. ADDRESS AT WELL LOCATION 2790 E. 4th STREET
 MAILING ADDRESS 1100 Tanager Country Rd., Reno, NV 89512
ORANGE, CA 92868 Subdivision Name: ØMT County: WASHOE

2. LOCATION SP 12 1/4 Ave Sec 16 T 19 N/S R 20 E Latitude 3932083.015 M E NAD 27
 PERMIT/WAIVER No. D-000142 822804 Longitude 11946545.848 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 Cable
 Municipal/Industrial Monitor Stock Air Other SONIC

5. WELL TYPE
 Rotary RVC
 Other SONIC

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>SAND, GRAVELS AND</u>				
<u>granite work lens</u>		<u>0</u>	<u>30</u>	<u>30</u>
<u>SAME</u>	<u>X</u>	<u>30</u>	<u>66</u>	<u>36</u>
<u>WASHOE COUNTY</u>				
<u>W 119.779795 NAD27</u>				
<u>N 39.534826</u>				
<u>W 119.779795 NAD27</u>				

9. WELL CONSTRUCTION

Depth Drilled	Feet	Depth Cased	Feet
<u>66</u>		<u>65</u>	

HOLE DIAMETER (BIT SIZE)

From	To
<u>8</u> Inches	<u>0</u> Feet <u>66</u> Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>4</u>		<u>SEWER 40 NVC</u>	<u>0</u>	<u>65</u>

Perforations:

Type of perforation PER. SCREEN

Size of perforation Ø20

From 30 feet to 65 feet

From _____ feet to _____ feet

Annular Seal: Yes No

Neat Cement 0 to 25 Pumped Poured

Cement Grout _____ to _____ Pumped Poured

Concrete Grout _____ to _____ Pumped Poured

≥30% Bentonite Grout _____ to _____ Pumped Poured

Gravel Pack: Yes No 25 to 66 Pumped Poured

Type: #3 MONTEREY

Bentonite Chips: Yes No 25 to 25 Pumped Poured

Type: 3/8" HELE, NUG

7. Water Level

Static water level: 34 feet below land surface

Artesian Flow: _____ G.P.M. _____ P.S.I.

Water Temperature: _____ °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 type="checkbox"/> Air Lift			

STATE ENGINEERS OFFICE
 05:11:11 12 NOV 2008
 RECEIVED

10. DRILLER'S CERTIFICATION

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

Name BOART LONGYEAR Contractor

Address 3894 RAILROAD AVE Contractor
Yuba City, CA 95991

Nevada contractor's license number 0021976
 issued by the State Contractor's Board

Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2234

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

Date 11-10-08