STATE OF NEVADA

DIVISION OF WATER RESOURCES

WELL DRILLER'S REPORT

OFFICE USE ONLY
Log No. 107579
Permit No.
Basin 101

PRINT OR TYPE ONLY

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

NOTICE OF INTENT NO. 63601

1. OWNER Robin & Susan Lampson
MAILING ADDRESS 3190 Lone Tree Rd.
Fallon NV. 89406

ADDRESS AT WELL LOCATION 3190 Lone tree Rd.
Fallon
Subdivision Name: County: Churchill

2. LOCATION NE¼NE¼ Sec27T18N/ R28E
PERMIT/WAIVER NO. 006-491-11
Issued by Water Resources Parcel. No.

Latitude 39.40134 UTM E ☐ NAD 27
Longitude 118.82169 N ☒ NAD 83/WGS 84

3. WORK 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 Mud

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Fine sand		0	3	3
Brown sandy clay		3	14	11
Sand		14	24	10
Coarse sand some clay		24	29	5
Gray sandy clay		29	40	11
Black sand some clay		40	73	33
Coarse granite sands		73	90	17
Black sandy clay		90	106	16
Gray sands & gravel		106	112	6
Gray sandy clay		112	126	14
Gray sand		126	142	16
Gray sand and clay		142	151	9
Fine gray sand		151	160	9
Gray clay		160	165	5
Black clay		165	197	32
Gray sands		197	205	8
Gray & black clay		205	211	6
Gray sand & gravel	X	211	220	9

N39.401422
W118.820704 NAD27

Date started: 12/2/08, 20
Date completed: 12/10/08, 20

9. WELL CONSTRUCTION
Depth Drilled 220 Feet Depth Cased 220 Feet

HOLE DIAMETER (BIT SIZE)

	From	To
11 Inches	0 Feet	220 Feet
Inches	Feet	Feet
Inches	Feet	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	12.92	.188	+2	220

Perforations:
Type of perforation Factory
Size of perforation 3/32 x 3
From 200 feet to 220 feet
From feet to feet
From feet to feet
From feet to feet
From feet to feet

Annular Seal: ☒ Yes ☐ No
☒ Neat Cement 0 to 100 ☒ Pumped ☐ Poured
☐ Cement Grout to ☐ Pumped ☐ Poured
☐ Concrete Grout to ☐ Pumped ☐ Poured
☐ ≥30% Bentonite Grout to ☐ Pumped ☐ Poured
Gravel Pack: ☒ Yes ☐ No 100 to 220 ☐ Pumped ☒ Poured
Type: 1/4 x 1/8
Bentonite Chips: ☐ Yes ☒ No to ☐ Pumped ☐ Poured
Type:

7. Water Level
Static water level: 19 feet below land surface
Artesian Flow: G.P.M. P.S.I
Water Temperature: Cool °F
Quality: Not tested

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

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
10		3

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name Bruce MacKay Pump & Well Service, Inc. (CONTRACTOR)
Address 1600 Mt. Rose Hwy (CONTRACTOR)
Reno, NV 89511
Nevada contractor's license number issued by the State Contractor's Board 23096
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 923
Signed R. Bruce MacKay
By driller performing actual drilling on site or contractor
Date 12/16/08

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