

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

OFFICE USE ONLY

Log No. 107758
Permit No. _____
Basin 083



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. 63460

1. OWNER John Crouch ADDRESS AT WELL LOCATION 22800 Mountain Top Road
MAILING ADDRESS 501 W. Moana Ln. #86 Virginia City, NV
Reno, NV 89509 Subdivision Name: _____ County: Storey

2. LOCATION SW ¼ SE ¼ Sec 10 T 17N N/S R 21 E Latitude 39.348493 UTM E NAD 27
PERMIT/WAIVER No. 004-271-17 Longitude 119.608232 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 mud

6. LITHOLOGIC LOG				
Material	Water Strata	From	To	Thick-ness
red volcanic		0	105	
gray granite		105	195	
red volcanic		195	500	
gray rock		500	700	
brown clay & sand		700	900	
volcanic rock		900	1170	
N39.348580 W 119.607220 NAD83				

9. WELL CONSTRUCTION				
Depth Drilled	1170	Feet	Depth Cased	1170
HOLE DIAMETER (BIT SIZE)				
	From		To	
10 5/8	Inches	0	Feet	50
8 3/4	Inches	50	Feet	900
6 1/8	Inches	900	Feet	1170
CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	12.97	188	+1	900
5 9/16	10.7	188	890	1170
Perforations:				
Type of perforation	factory mill slot			
Size of perforation	3/32			
From	910	feet to	930	feet
From	1050	feet to	1070	feet
From	1090	feet to	1170	feet
From		feet to		feet
From		feet to		feet
Annular Seal: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
<input type="checkbox"/> Neat Cement	to		<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input checked="" type="checkbox"/> Cement Grout	0	to 200	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
<input type="checkbox"/> Concrete Grout	to		<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> ≥30% Bentonite Grout	to		<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
Gravel Pack: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	to		<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
Type:				
Bentonite Chips: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	to		<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
Type:				

Date started: 13-Sep, 20 08
Date completed: 10-Oct, 20 08

7. Water Level
Static water level: 800 feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: cold °F
Quality: clear

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			
	10	890	2
	20	1170	1
STATE ENGINEERS OF NV			
NOV 4 - 11 AM '08			

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name McKay Drilling, Inc
Contractor
Address 4850 Jolie St. Suite A5
Contractor
Reno, NV 89502
Nevada contractor's license number _____
issued by the State Contractor's Board 14170
Nevada driller's license number issued by the _____
Division of Water Resources, the on-site driller 786
Signed [Signature]
By driller performing actual drilling on site or contractor
Date 10/10/2008