

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

OFFICE USE ONLY **107805**

Log No. _____
 Permit No. _____
 Basin **033A**

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. **63854**

1. OWNER **Robert E Bartell Jr** ADDRESS AT WELL LOCATION **S. Valley Road**
 MAILING ADDRESS **PO Box 130 Orovada NV 89425** **Orovada, NV 89425**
 Subdivision Name: _____ County: **Humboldt**

2. LOCATION **NE1/4SW1/4 Sec21T42N / R37E** Latitude **N41°30.088** UTM E _____ NAD 27
 PERMIT/WAIVER NO. **44694** Parcel No. **N/A** Longitude **W117°49.225** N _____ NAD 83/WGS 84
Issued by Water Resources

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

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Sand		0	3	3
Clay		3	40	37
Sand/Clay		40	60	20
Cobles Clay		60	90	30
Sand		90	110	20
Clay		110	150	40
Sand/Gravel	X	150	160	10
Clay		160	170	10
Sand/Gravel	X	170	190	20
Clay		190	195	5

*N41.501585
W 117.819438 NAD27*

9. WELL CONSTRUCTION

Depth Drilled **195** Feet Depth Cased **195** Feet

HOLE DIAMETER (BIT SIZE)

From	To
10 5/8 Inches	0 Feet 195 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	10	188	+1	20
6.625	4.06	.316	20	195

Perforations:

Type of perforation **Factory Cut Slots**

Size of perforation **050**

From	To
155 feet to	195 feet
_____ feet to	_____ feet
_____ feet to	_____ feet
_____ feet to	_____ feet

Annular Seal: Yes No

Neat Cement 0 to 50 Pumped Poured
 Cement Grout _____ to _____ Pumped Poured
 Concrete Grout _____ to _____ Pumped Poured
 ≥30% Bentonite Grout _____ to _____ Pumped Poured

Gravel Pack: Yes No 50 to 195 Pumped Poured
 Type: _____

Bentonite Chips: Yes No _____ to _____ Pumped Poured
 Type: _____

Date started: **December 18**, 20**08**
 Date completed: **December 22**, 20**08**

7. Water Level
 Static water level: **104** feet below land surface
 Artesian Flow: **N/A** G.P.M. **N/A** P.S.I
 Water Temperature: **Cool** °F
 Quality: **Good**

8. WELL TEST DATA

TEST METHOD:	<input type="checkbox"/> Bailer	<input type="checkbox"/> Pump	<input checked="" type="checkbox"/> Air Lift
G.P.M. (Draw Down)	22		4
(Feet Below Static)	02:11:14		S-NVC 600Z

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name **Fred Anderson Drilling, Inc.** (CONTRACTOR)
 Address **10760 S. Grass Valley Road** (CONTRACTOR)
Winnemucca, NV 89445
 Nevada contractor's license number issued by the State Contractor's Board **021467**
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **2083**
 Signed *Fred Anderson Drilling Inc*
 By driller performing actual drilling on site or contractor
 Date **December 31, 2008**