

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

OFFICE USE ONLY

Log No. 108285
 Permit No. _____
 Basin 857

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. 63724

1. OWNER **John Parks** ADDRESS AT WELL LOCATION **Antelope Valley**
 MAILING ADDRESS **HC61 Box 150** **Battle Mtn, NV 89820**
Battle MTN, NV 89820 *Subdivision Name:* _____ *County:* **Churchill**

2. LOCATION **SE 1/4 NW 1/4 Sec 28 T25N R41E** Latitude **40.01137N** UTM E _____ NAD 27
 PERMIT/WAIVER NO. **76944** Longitude **-117.37035W** N _____ NAD 83/WGS 84
Issued by Water Resources Parcel No. _____

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	Thickness
Sand & gravel		0	12	12
Gravel		12	32	20
Gray Clay		32	64	32
gray Clay & gravel		64	105	41
Brown Clay		105	118	13
Gravel		118	133	15
Gray Clay w/sand		133	145	12
Brown Clay		145	165	20
gravel		165	186	21
Brown Clay		186	199	13
Gray Clay		199	218	19
Brown Clay		218	258	40
Gravel		258	271	13
Brown Clay w/st gravel		271	318	47
Brown Clay		318	400	82

40.011453° N
117.369411° W
NAD27

Date started: 3/24, 20 09
 Date completed: 3/29, 20 09

9. WELL CONSTRUCTION

Depth Drilled 400 Feet Depth Cased 400 Feet

HOLE DIAMETER (BIT SIZE)

From	To
<u>36 26</u> Inches	<u>0</u> Feet <u>50</u> Feet
<u>26 36</u> Inches	<u>50</u> Feet <u>400</u> Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>30</u>	<u>118.7</u>	<u>.375</u>	<u>0</u>	<u>5</u>
<u>30</u>	<u>39.5</u>	<u>.109</u>	<u>5</u>	<u>50</u>
<u>16</u>	<u>42.1</u>	<u>.250</u>	<u>50</u>	<u>400</u>

Perforations:
 Type of perforation Mill cut
 Size of perforation 3/16
 From 84 feet to 360 feet
 From _____ feet to _____ feet

Annular Seal: Yes No

Neat Cement _____ to _____ Pumped Poured
 Cement Grout _____ to _____ Pumped Poured
 Concrete Grout 0 to 50 Pumped Poured
 ≥30% Bentonite Grout _____ to _____ Pumped Poured
 Gravel Pack: Yes No 400 to 0 Pumped Poured
 Type: 3/8" Well Rock
 Bentonite Chips: Yes No _____ to _____ Pumped Poured
 Type: _____

7. Water Level
 Static water level: 103 feet below land surface
 Artesian Flow: _____ G.P.M. _____ P.S.I.
 Water Temperature: cool °F
 Quality: unknown

8. WELL TEST DATA

TEST METHOD:	Draw Down		
	G.P.M.	(Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift			
Customer	did own	test pump	

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 **2285**

Signed _____
 By driller performing actual drilling on site or contractor
 Date 4/15/2009

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 STATE ENGINEERS