

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

OFFICE USE ONLY
Log No. 108290
Permit No. _____
Basin 649

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. 63961

1. OWNER Sienna Pacific power Co ADDRESS AT WELL LOCATION 700+ 800 Silver Street
MAILING ADDRESS PO Box 10100 MW-3 EIKO NV 89801
Reno NV 89520 Subdivision Name: _____ County: _____

2. LOCATION SE 1/4 NE 1/4 Sec 15 T 34 N/S R 55 E Latitude 40° 49.980' UTM E NAD 27
PERMIT/WAIVER No. F-000283 001-352-005 Longitude 115° 45.569' 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 Stock
 Municipal/Industrial Monitor Other _____
5. WELL TYPE Cable Rotary RVC
 Air Other Auger

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Asphalt		0	4"	
gravel fill		4"	10"	
Silty clay brown		10"	10	
Coarse sand + gravel		10	22	
fine sand some clay		22	30	
clay + silt		30	31	

40.833379°N
115.758582°W
NAD 27

9. WELL CONSTRUCTION
Depth Drilled 31 Feet Depth Cased 31 Feet
HOLE DIAMETER (BIT SIZE)
From 8 Inches To 31 Feet
Inches _____ Feet _____
Inches _____ Feet _____

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>2.250</u>	<u>.64</u>	<u>.125</u>	<u>0</u>	<u>30</u>

Perforations:
Type of perforation Factory Slotted
Size of perforation .020
From 10 feet to 30 feet
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet

Annular Seal: Yes No
 Neat Cement to _____ Pumped Poured
 Cement Grout to _____ Pumped Poured
 Concrete Grout 1 to 5 Pumped Poured
 ≥30% Bentonite Grout to _____ Pumped Poured

Gravel Pack: Yes No 8 to 31 Pumped Poured
Type: 2-12
Bentonite Chips: Yes No 5 to 8 Pumped Poured
Type: 3/8 chips

Date started: 2-26 20 09
Date completed: 2-26 20 09

7. Water Level
Static water level: 20 feet below land surface
Artesian Flow: N/A G.P.M. N/A P.S.I.
Water Temperature: N/A °F
Quality: good

8. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input checked="" type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift			
<u>bailer</u>	<u>1.5</u>	<u>1</u>	<u>1/2</u>

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name WDC Exploration + Wells Contractor
Address 570 Corinthian way Contractor
N Las Vegas NV 89030
Nevada contractor's license number _____
issued by the State Contractor's Board 0012852
Nevada driller's license number issued by the Division of Water Resources, the on-site driller M 2371
Signed [Signature]
By driller performing actual drilling on site or contractor
Date 3-23-09