

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

OFFICE USE ONLY

Log No. 108294
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 Sierra Pacific power Co ADDRESS AT WELL LOCATION 7007 800 Silver Street
MAILING ADDRESS PO Box 10100 Reno NV 89520 MW-9 EIKO NV 89801
Subdivision Name: _____ County: _____

2. LOCATION SE 1/4 NE 1/4 Sec 15 T 34 N/S R 55 E Latitude 40° 50.041' UTM E NAD 27
PERMIT/WAIVER No. F-000 883 001-352-005 Longitude 116° 45.503' 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 Cable Rotary RVC
 Municipal/Industrial Monitor Stock Air Other Auger

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Concrete		0	4"	
gravel fill		4"	10"	
Brown fine sand w/ clay		10"	15	
Brown coarse sand + gravel		15	31	

9. WELL CONSTRUCTION

Depth Drilled 31 Feet Depth Cased 31 Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet	Feet
<u>8</u>	<u>0</u>	<u>31</u>		

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: 2-25 , 20 09
Date completed: 2-25 , 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: Bailer Pump Air Lift

TEST METHOD	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<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]
Date 2-23-09