

STATE OF NEVADA
 DIVISION OF WATER RESOURCES

OFFICE USE ONLY
 Log No. 108528
 Permit No. _____
 Basin 162

WELL DRILLER'S REPORT

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. 33164

1. OWNER DON SETTO
 MAILING ADDRESS 1581 E THORNE DR.
PAHRUMP, NV

ADDRESS AT WELL LOCATION 1581 E THORNE

2. LOCATION NW 1/4 NE 1/4 Sec. 35 T 21S
 PERMIT NO. _____
 Issued by Water Resources _____ Parcel No. 41-322-14

N/S R 53E E NYE County
CALVADA VALLEY UNIT 14
 Subdivision Name

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Abandon 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
SILT		0	6	6
CLAY		6	84	78
CEMENTED SADB & GRAVEL		84	105	21
SAND & GRAVEL	WB	105	200	95

N 36° 05.248
 W 115° 58.295

8. WELL CONSTRUCTION
 Depth Drilled 200 Feet Depth Cased 200 Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet	Feet
<u>10</u>	<u>0</u>	<u>200</u>		

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>4.5</u>	<u>2.06</u>	<u>.236</u>	<u>0</u>	<u>200</u>

Perforations:
 Type perforation SAWCUT
 Size perforation 1/8 X 4
 From 140 feet to 200 feet
 From _____ feet to _____ feet

Surface Seal: Yes No
 Depth of Seal 50
 Placement Method: Pumped Poured
 Seal Type: Neat Cement Cement Grout Concrete Grout
 Gravel Packed: Yes No
 From 50 feet to 200 feet

9. WATER LEVEL
 Static water level 96 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name GREAT BASIN DRILLING CO. OF NEVADA, INC.
 Contractor

Address 1220 E MANSE RD
 Contractor
PAHRUMP, NV. 89048

Nevada contractor's license number issued by the State Contractor's Board 47333

Nevada driller's license number issued by the Division of Water Resources, the on-site driller 14261642

Signed _____
 By driller performing actual drilling on-site or contractor
 Date 6/12/2009

7. WELL TEST DATA

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

DCNR/DWR
 RECEIVED
 JUN 23 2009
 LAS VEGAS OFFICE

Date started 6/2/2009, 19
 Date completed 6/3/2009, 19