

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

OFFICE USE ONLY
 Log No. 108833
 Permit No. _____
 Basin 118

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. 64498

1. OWNER Nye County ADDRESS AT WELL LOCATION Gabbs Valley
 MAILING ADDRESS P.O. Box 1592 Gabbs, NV
500 SW Tonopah, NV 89049 Subdivision Name: _____ County: Nye

2. LOCATION NW 1/4 SE 1/4 Sec 12 T3N R36E Latitude 38.92827 UTM E _____ NAD 27
 PERMIT/WAIVER NO. 78057/W-632B Longitude -117.92227 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	Thick-ness
Sand & Gravel		0	30	30
Clay		30	35	5
Sand & Gravel		35	140	105
Clay		140	158	18
Sand & gravel		158	170	12
Clay		170	182	12
sand & gravel	X	182	270	88
Clay		270	290	20
Sand & gravel	X	290	334	44
Clay		334	350	16
Sand & gravel	X	350	410	60
Clay w/Streaks w/ Gravel		410	500	90

Plugged on 9/1-3/2009 by same well # 6 4498

38.928345° N
117.921321° W
NAD 27
(78)

9. WELL CONSTRUCTION
 Depth Drilled 500 Feet Depth Cased 500 Feet

HOLE DIAMETER (BIT SIZE)
 From _____ To _____
17.5 Inches 0 Feet 20 Feet
12.25 Inches 20 Feet 500 Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/FT. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6	17	.250	0	20
6 SDR 17	4.95	.390	20	500

Perforations:
 Type of perforation Certainteed well Screen
 Size of perforation .032
 From 400 feet to 380 feet
 From 320 feet to 300 feet
 From 260 feet to 220 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Annular Seal: Yes No

Neat Cement 0 to 100 Pumped Poured
 Cement Grout _____ to _____ Pumped Poured
 Concrete Grout _____ to _____ Pumped Poured
 ≥30% Bentonite Grout _____ to _____ Pumped Poured

Gravel Pack: Yes No 100 to 500 Pumped Poured
 Type: 3/8"

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

Date started: 7/14, 20 09
 Date completed: 7/24, 20 09

7. Water Level
 Static water level: 97 feet below land surface
 Artesian Flow: _____ G.P.M. _____ P.S.I.
 Water Temperature: 95 °F
 Quality: unknown

8. WELL TEST DATA

TEST METHOD:	<input type="checkbox"/> Baller	<input checked="" type="checkbox"/> Pump	<input type="checkbox"/> Air Lift
	Draw Down (Feet Below Static)		Time (Hours)
Pump	<u>98</u>	<u>72</u>	<u>72</u>
	<u>90</u>	<u>62</u>	<u>60</u>
	<u>86</u>	<u>52</u>	<u>50</u>

STATISTICAL ENGINEERS OF NEVADA
90 AM 11:06
RECEIVED

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 2307

Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date 8/3/09