

M-149

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

OFFICE USE ONLY
Log No. 109301
Permit No.
Basin 210

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. 34497

1. OWNER Trox LLC ADDRESS AT WELL LOCATION South of Warm Springs Rd & East of 4th St.
 MAILING ADDRESS PO Box 268859 Subdivision Name: _____ County: Clark
Oklahoma City, OK 73126-8859

2. LOCATION SW 1/4 SE 1/4 Sec 12 T 22 N R 62 E Latitude 36 02 39.7 UTM E NAD 27
 PERMIT/WAIVER No. 178 12 801 001 Longitude 115 00 02.95 N NAD 83/WGS 84

3. WORKED PERFORMED
 New Well Replace Recondition
 Deepen Other

4. PROPOSED USE
 Domestic Irrigation Test Monitor Stock
 Municipal/Industrial

5. WELL TYPE
 Cable Rotary RVC
 Air Other Sonic

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>Sand</u>		<u>0</u>	<u>20</u>	<u>20</u>
<u>Gravel</u>		<u>20</u>	<u>42</u>	<u>22</u>
<u>Caliche</u>		<u>42</u>	<u>46</u>	<u>4</u>
<u>Silty Sand</u>	<u>X</u>	<u>46</u>	<u>120</u>	<u>74</u>

9. WELL CONSTRUCTION

Depth Drilled 120 Feet Depth Cased 120 Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet
<u>6</u>	<u>0</u>	<u>120</u>	

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>2.375</u>	<u>.69</u>	<u>.154</u>	<u>0</u>	<u>100</u>

Perforations:

Type of perforation Factory Slot
 Size of perforation .020

From	feet to	feet
	<u>100</u>	<u>120</u>

Annular Seal: Yes No

Material	to	to	Pumped	Poured
<input type="checkbox"/> Neat Cement			<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> Cement Grout			<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input checked="" type="checkbox"/> Concrete Grout	<u>0</u>	<u>3</u>	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
<input checked="" type="checkbox"/> ≥30% Bentonite Grout	<u>3</u>	<u>92</u>	<input checked="" type="checkbox"/> Pumped	<input type="checkbox"/> Poured
Gravel Pack: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<u>96</u>	<u>120</u>	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
Type:	<u>10-20 Sand</u>			
Bentonite Chips: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<u>92</u>	<u>96</u>	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
Type:	<u>3/8 Chips</u>			

7. Water Level

Static water level: 43 feet below land surface
 Artesian Flow: _____ G.P.M. _____ P.S.I.
 Water Temperature: _____ °F
 Quality: _____

8. WELL TEST DATA

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

10. DRILLER'S CERTIFICATION

This well was drilled under my supervision and the report is true to the best of my knowledge.

Name BOART LONGYEAR COMPANY
 Address 7773 W Selden Ln
Peoria, Az 85345
 Nevada contractor's license number 0010157
 issued by the State Contractor's Board
 Nevada driller's license number issued by the M-2147
 Division of Water Resources, the on-site driller

Signed Shan C.
 By driller performing actual drilling on-site or contractor
 Date 10-21-09

USE ADDITIONAL SHEETS IF NECESSARY