

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

OFFICE USE ONLY

Log No. 109577
Permit No. _____
Basin 179

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

AS-2
NOTICE OF INTENT NO. 62025

1. OWNER Chevron Envt. Management Co. ADDRESS AT WELL LOCATION 801 East Aultman St.
MAILING ADDRESS 6801 Bollinger Cyn. Rd. Ely, NV 89201
San Ramon, CA 94583 Subdivision Name: _____ County: White Pine

2. LOCATION SE 1/4 NW 1/4 Sec 15 T 16 N S R 63 E Latitude 39°15' 26.31" UTM E NAD 27
PERMIT/WAIVER No. 6-000034 002-054-09 Longitude 114°52' 33.41" 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 Monitor
 Municipal/Industrial Stock Air

5. WELL TYPE
 Cable Rotary RVC
 Air Other SONIC

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>Fill material</u>				
<u>silt & cobble</u>		<u>0</u>	<u>6</u>	<u>6</u>
<u>Sandy silt, gray</u>		<u>6</u>	<u>83</u>	<u>77</u>
<u>grey in color</u>				
<u>Clay</u>		<u>83</u>	<u>85</u>	<u>2</u>
<u>WATER</u>	<u>X</u>	<u>78</u>	<u>83</u>	<u>5</u>
<u>39.254449° N</u>				
<u>114.871382° W</u>				
<u>NAD 27 (PA)</u>				

9. WELL CONSTRUCTION
Depth Drilled 85 Feet Depth Cased 83 Feet
HOLE DIAMETER (BIT SIZE)
From 6 Inches To 8.5 Feet
Inches _____ Feet _____
Inches _____ Feet _____

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>2</u>		<u>schd 40 PVC</u>	<u>0</u>	<u>83</u>

Perforations:
Type of perforation PVC SCREEN
Size of perforation 0.20 slot
From 80.5 feet to 83 feet
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet

Annular Seal: Yes No
 Neat Cement 0 to 75 Pumped Poured
 Cement Grout _____ to _____ Pumped Poured
 Concrete Grout _____ to _____ Pumped Poured
 ≥30% Bentonite Grout _____ to _____ Pumped Poured

Gravel Pack: Yes No 78 to 85 Pumped Poured
Type: #3 MONTEREY
Bentonite Chips: Yes No 75 to 78 Pumped Poured
Type: 3/8" Hole Plug Chips

Date started: 1-14, 20 09
Date completed: 1-14, 20 09

7. Water Level
Static water level: 72 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"/> Bailer			
<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 Contractor
Address 3894 RAILROAD AVE. Contractor
Yuba City, CA 95991
Nevada contractor's license number _____
issued by the State Contractor's Board 0021976
Nevada driller's license number issued by the _____
Division of Water Resources, the on-site driller 2234
Signed _____
By driller performing actual drilling on-site or contractor
Date 2-3-09