

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

OFFICE USE ONLY
Log No. 110397
Permit No. _____
Basin High Desert

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. 58460

1. OWNER Tom Brown ADDRESS AT WELL LOCATION 9205 Antelope
MAILING ADDRESS 9205 Antelope Winnemucca, Nv 89445 Subdivision Name: _____ County: HUMBOLDT
Winnemucca, Nv 89445 Parcel No. 35

2. LOCATION NW ¼ NW ¼ Sec 25 T 36 N R 36 E Latitude 40 53.138n UTM E _____ NAD 27 _____
PERMIT/WAIVER No. 0 05-511-01 Longitude 117 53.373w N _____ X _____

3. WORKED PERFORMED
New Well Recondition Deepen Other

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

5. WELL TYPE
Cable RVC Air Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Sand & top soil		0	4	4
Sand & gravel		4	28	24
clay		28	35	7
Sand & gravel		35	85	50
Sand & gravel w/ clay stringers		85	120	35
		120		-120

9. WELL CONSTRUCTION
Depth Drilled 120 Feet Depth Cased 120
HOLE DIAMETER (BIT SIZE)
From _____ To _____
10 5/8 inches _____ Feet _____ Feet
_____ inches _____ Feet _____ Feet
_____ inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6.5	STEEL	.188	0	20
	PVC	.350	20	120

Perforations
Type of perforation PVC Screen
Size of perforation 1/16
From 80 feet to 120 feet
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet

Annular Seal: Yes
Neat Cement _____ to _____ Pumped _____ Poured _____
Cement Grout 4 to 60 Pumped _____ Poured _____
Concrete Grout _____ to _____ Pumped _____ Poured _____
≥30% Bentonite Grout _____ to _____ Pumped _____ Poured _____
Gravel Pack: Yes No 52 to 120 Pumped Poured _____
Type: 3/8 minus
Bentonite Chips: Yes No 50 to 52 Pumped Poured _____
Type: 3/8 beroid

Date started: 8-16 20 07
Date completed: 8-18 20 07

7. Water Level
Static water level: 91 feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: COLD °F
Quality: _____

8. WELL TEST DATA

TEST METHOD:	Bailer	Pump	Air Lift
	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
AIR			4

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name High Desert Drilling LLC
Contractor _____
Address 4225 E Mary Way
Contractor _____
Winnemucca Nevada 89445
Nevada contractor's license number _____ issued by the State Contractor's Board
Nevada driller's license number issued by the Division of Water Resources, the on-site driller: _____
Signed [Signature] # 2364
By driller performing actual drilling on site or contractor
Date # 3-23-2010

RECEIVED
2010 MAR 20 AM 11:21
STATE ENGINEERS OFFICE

USE ADDITIONAL SHEETS IF NECESSARY

40.885730°N
117.888522°W
N26 22 (TO)