

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

OFFICE USE ONLY
Log No. 111535
Permit No. _____
Basin 163

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

1. OWNER THOMAS A. HARTUNG ADDRESS AT WELL LOCATION 1520 GOLD AV. SANDY VALLEY
MAILING ADDRESS HCR 31 Box 374 SANDY VALLEY NV. 89019 Subdivision Name: _____ County: CLARK
2. LOCATION SE 1/4 NW 1/4 Sec 23 T 24 N R 56 E Latitude 35° 50' 46.0 UTM E NAD 27
PERMIT/WAIVER No. 200-23-201-029 Longitude 115° 39' 47.0 N NAD 83/WGS 84

3. WORKED 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
CLEAN OUT FILL		180	240	60
CLAY + GRAVEL		240	270	30
ROCK + GRAVEL	W.B	270	285	15
CLAY + GRAVEL		285	310	25
ROCK + GRAVEL	W.G	310	320	10
CEMENTED ROCK + GRAVEL w/ FRACTURES	UMB	320	340	20

DEEPEN 8" STEEL WELL # 34635
240 FT. - 340 FT.
INSTALL 6" PVC LINDER F. 340 FT. - 130 FT.

9. WELL CONSTRUCTION
Depth Drilled 340 Feet Depth Cased 340 Feet
HOLE DIAMETER (BIT SIZE)
7 7/8 Inches From 240 Feet To 340 Feet
Inches Feet Feet Feet
Inches Feet Feet Feet
Inches Feet Feet Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 5/8</u>	<u>4.33</u>	<u>.316</u>	<u>PVC</u>	<u>340</u> <u>130</u>

Perforations:
Type of perforation FACTORY SCREEN
Size of perforation .032 X 6 ROW
From 340 feet to 270 feet
From _____ feet to _____ feet

Annular Seal: Yes No EXISTING

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

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

Date started: 6-10, 20 10
Date completed: 6-14, 20 10

7. Water Level
Static water level: 88 feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: COOL °F
Quality: _____

8. WELL TEST DATA

TEST METHOD: Bailor Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>1 1/2 HP.</u>	<u>20</u>	<u>182 FT.</u>
		<u>1 HR.</u>

DCNR/DWR RECEIVED
JUN 22 2010

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name BUDGET DRILLING CO. Contractor
Address P.O. Box 3505 Prater NV. 89041 Contractor
Nevada contractor's license number 40020
issued by the State Contractor's Board
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1573
Signed [Signature]
By driller performing actual drilling on-site or contractor
Date 6-17-2010