

BC-1-5

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

OFFICE USE ONLY
Log No. 114930
Permit No. _____
Basin 218

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. 34449

1. OWNER USA
MAILING ADDRESS Washington DC

ADDRESS AT WELL LOCATION NU Energy, Reid Gardner Station, MOAPA, NV, 89
Subdivision Name: _____ County: Clark

2. LOCATION NE NE 1/4 Sec 09 T 15 N R 16 E
PERMIT/WAIVER No. 042-06-50-001
Issued by Water Resources: _____ Parcel No. _____

Latitude 36.6637323 UTM E NAD 27
Longitude 114.6429589 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
<u>Silty SAND</u>		<u>0</u>	<u>10</u>	<u>10</u>
<u>Silty GRAVEL</u>		<u>10</u>	<u>20</u>	<u>10</u>
<u>GRAVEL/COBLES</u>		<u>20</u>	<u>25</u>	<u>5</u>
<u>BRN CLAY</u>		<u>25</u>	<u>26</u>	<u>1</u>
<u>GRAVEL/COBLES</u>		<u>26</u>	<u>29</u>	<u>3</u>
<u>HEAVY SANDS & GRAVELS</u>		<u>29</u>	<u>32</u>	<u>3</u>
<u>GRAVELS</u>		<u>32</u>	<u>41</u>	<u>9</u>

9. WELL CONSTRUCTION				
Depth Drilled	Feet	Depth Cased	Feet	Feet
<u>8'</u>		<u>41'</u>		

HOLE DIAMETER (BIT SIZE)				
	From	To	Feet	Feet
<u>8"</u>	<u>41</u>	<u>0</u>		

CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>4"</u>		<u>SCHL 40</u>	<u>41</u>	<u>36</u>
<u>4"</u>		<u>SCHL 40</u>	<u>18</u>	<u>0</u>

Perforations:
Type of perforation MACHINE SLOT
Size of perforation .010

From 3.6 feet to 18 feet
From _____ feet to _____ feet

Annular Seal: Yes No

Neat Cement to _____ Pumped Poured
 Cement Grout 10 to 0 Pumped Poured
 Concrete Grout to _____ Pumped Poured
 ≥30% Bentonite Grout to _____ Pumped Poured

Gravel Pack: Yes No 41 to 14 Pumped Poured
Type: #12 SAND

Bentonite Chips: Yes No 14 to 10 Pumped Poured
Type: 3/8

Date started: 1/11/12, 20
Date completed: 1/13/12, 20

7. Water Level
Static water level: 25 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.	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift	Draw Down (Feet Below Static)	
DCNR/DWR RECEIVED		
FEB 07 2012		

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name Example Drilling LLC Contractor
Address 7150 PLACID ST LV NV 89119 Contractor
Nevada contractor's license number _____
issued by the State Contractor's Board 51266
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2399
Signed [Signature]
By driller performing actual drilling on-site or contractor
Date 2/5/12