

**DRILLING/
PLUGGING**

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

OFFICE USE ONLY
Log No. 115055
Permit No. 80508
Basin 109

"Well #1"

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. 67700

1. OWNER Rafter 7 Ranch / Tom Filbin ADDRESS AT WELL LOCATION East Walker Area
MAILING ADDRESS 92 East Walker Rd. Yerington, NV 89447 Subdivision Name: _____ County: Lyon

2. LOCATION NW ¼ NW ¼ Sec 33 T 10N N/S R 27 E Latitude 38.68924 N UTM E NAD 27
PERMIT/WAIVER No. 80508 Longitude -118.97741 W N NAD 83/WGS 84
Issued by Water Resources Parcel No. _____

3. WORKED PERFORMED
 New Well Replace Recondition
 Deepen Other Bore Hole

4. PROPOSED USE
 Domestic Irrigation Test Monitor Stock

5. WELL TYPE
 Cable Rotary RVC
 Air Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Sand		0	10	10
Rock		10	16	6
Gravel rock		16	38	22
Rock w/s Gravel		38	123	85
Rock		123	500	377
* See corresponding NOI # <u>67025</u>				
Not sufficient enough water to make well.				
The bore hole was fill from the bottom of the hole to the top with 20% bentonite from 500' to 20' and Neat cement from 20' to the top.				

9. WELL CONSTRUCTION

Depth Drilled 500 Feet Depth Cased 500 Feet

HOLE DIAMETER (BIT SIZE)

From	To
<u>10</u> Inches	<u>0</u> Feet <u>500</u> Feet
_____ Inches	_____ Feet _____ Feet
_____ Inches	_____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Perforations:

Type of perforation _____
Size of perforation _____

From	to	feet to	feet
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Annular Seal: Yes No

Material	to	Pumped	Poured
<input type="checkbox"/> Neat Cement	_____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Cement Grout	_____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Concrete Grout	_____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> ≥30% Bentonite Grout	_____	<input type="checkbox"/>	<input type="checkbox"/>

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

Date started: 8-Nov _____, 20 11
Date completed: 22-Nov _____, 20 11

7. Water Level

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

8. WELL TEST DATA

TEST METHOD: Bailor Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>38.1089323 ON</u>	<u>NAD 27</u>	
<u>118.976430 W</u>	<u>Dec/deg</u>	

10. DRILLER'S CERTIFICATION

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

Name Parsons Drilling, Inc.
Contractor

Address P.O. Box 1265
Contractor

Fallon, NV 89407

Nevada contractor's license number issued by the State Contractor's Board 29064

Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2307

Signed [Signature]
By driller performing actual drilling on site or contractor

Date 12/1/2011