

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

OFFICE USE ONLY
Log No. 116395
Permit No. _____
Basin pl69

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 Pauline Lambert ADDRESS AT WELL LOCATION George Circle
MAILING ADDRESS 4085 Lambert Dr. Winnemucca NV. 89445 Subdivision Name: Lambert County: Humboldt
2. LOCATION NE 1/4 SW 1/4 Sec 10 T 37 N SR 38 E Latitude N 41° 05' 75" E UTM E NAD 27
PERMIT/WAIVER No. 1606-612-6 Longitude W 117° 41' 40" W N NAD 83/WGS 84

3. WORKED PERFORMED
 New Well Replace Recondition
 Deepen Other

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

5. WELL TYPE
 Cable Rotary RVC
 Air Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
<u>Sand</u>	<u>NO</u>	<u>0</u>	<u>5</u>	<u>5</u>
<u>Sand clay</u>	<u>NO</u>	<u>5</u>	<u>25</u>	<u>20</u>
<u>Clay Sand</u>	<u>NO</u>	<u>25</u>	<u>40</u>	<u>15</u>
<u>Gravel Sand clay</u>	<u>NO</u>	<u>40</u>	<u>60</u>	<u>20</u>
<u>Gravel Sand</u>	<u>YES</u>	<u>60</u>	<u>100</u>	<u>40</u>

9. WELL CONSTRUCTION

Depth Drilled 100 Feet Depth Cased 100 Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet
<u>10 3/8</u>	<u>0</u>	<u>100</u>	<u>100</u>

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 3/8</u>	<u>188</u>	<u>Steel</u>	<u>0</u>	<u>20</u>
<u>6 3/8</u>	<u>schedule 40</u>	<u>PVC</u>	<u>20</u>	<u>100</u>

Perforations:

Type of perforation Slot
Size of perforation 25

From 80 feet to 100 feet

Annular Seal: Yes No

Neat Cement 0 to 50 Pumped Poured
 Cement Grout to Pumped Poured
 Concrete Grout to Pumped Poured
 ≥30% Bentonite Grout to Pumped Poured

Gravel Pack: Yes No 50 to 100 Pumped Poured
Type: 3/8 pm gravel

Bentonite Chips: Yes No to Pumped Poured
Type: _____

Date started: 4-23 20 11
Date completed: 4-30 20 11

7. Water Level
Static water level: 51 feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: cool °F
Quality: clean

8. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>30</u>	<u>0</u>	<u>3</u>

10. DRILLER'S CERTIFICATION

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

Name Alternative Drilling Contractor
Address 187 Western Hill Contractor
Spring Creek
Nevada contractor's license number _____
issued by the State Contractor's Board 2079855
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 730

Signed Gerald Moritz
By driller performing actual drilling on-site or contractor
Date 5-2-11

(Rev. 05-06)

41.096032°N
117.689055°W NA027

USE ADDITIONAL SHEETS IF NECESSARY

(NSPO 3-08)