

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

OFFICE USE ONLY
Log No. 11652a
Permit No. _____
Basin DLA

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 + Victor Trust ADDRESS AT WELL LOCATION 3540 Georgia Circle
MAILING ADDRESS 408.5 Lambert Dr. Winnemucca NV. 89445 Subdivision Name: Delaney County: Humboldt
NOTICE OF INTENT NO. 68491

2. LOCATION NE 1/4 SW 1/4 Sec 10 T 37 N R 38 E Latitude N41° 05.749 UTM E NAD 27
PERMIT/WAIVER No. R-723 006-612-50 Longitude W117° 41.438 N NAD 83/WGS 84
Issued by Water Resources Parcel No. _____

3. WORKED PERFORMED New Well Replace Recondition Deepen Other
4. PROPOSED USE Domestic Irrigation Test Stock Monitor Municipal/Industrial
5. WELL TYPE Cable Rotary RVC Air Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>Sand</u>	<u>NO</u>	<u>0</u>	<u>5</u>	<u>5</u>
<u>BRN Clay</u>	<u>NO</u>	<u>5</u>	<u>30</u>	<u>25</u>
<u>Clay Sand</u>	<u>NO</u>	<u>30</u>	<u>50</u>	<u>20</u>
<u>Gravel Sand Clay</u>	<u>YES</u>	<u>50</u>	<u>100</u>	<u>50</u>

9. WELL CONSTRUCTION

Depth Drilled 100 Feet Depth Cased 100 Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet
<u>10 7/8</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>Steel</u>	<u>.188</u>	<u>0</u>	<u>20</u>
<u>6 7/8</u>	<u>PVC</u>	<u>Sched 40</u>	<u>20</u>	<u>100</u>

Perforations:

Type of perforation Slot
Size of perforation .020

From 20 feet to 100 feet
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ 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" Pea

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

Date started: 12: 22 :20 12
Date completed: 12: 24 :20 12

7. Water Level
Static water level: 42 feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: Cold °F
Quality: Clear

8. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	<u>25</u>	<u>NA</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 Allied Drilling Inc. Contractor
Address 5140 Jungo Rd. Contractor
Winnemucca NV. 89445

Nevada contractor's license number _____
issued by the State Contractor's Board 76778
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1563

Signed [Signature]
By driller performing actual drilling on-site or contractor
Date 1-15-13

(Rev. 05-08) 41.095817° N
117.690633° W NAD27
(NSPO 3-08)

USE ADDITIONAL SHEETS IF NECESSARY