

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

OFFICE USE ONLY
Log No. 116653
Permit No. _____
Basin 071

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 Forrest Pettis ADDRESS AT WELL LOCATION 9485 Zaring Ave
MAILING ADDRESS 1100 Proanta Ave. Winnevocca NV 89445 Subdivision Name: Tycana County: Humboldt
NOTICE OF INTENT NO. 68495

2. LOCATION NW 1/4 SE 1/4 Sec 30 T 35 N R 38 E Latitude N 40° 52.733 UTM E NAD 27
PERMIT/WAIVER No. 1010-642-01 Longitude W 117° 44.597 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 Monitor Municipal/Industrial Stock

5. WELL TYPE Cable Rotary RVC Air Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Sand	NO	0	6	6
Coarse Gravel Clay	NO	6	120	114
Cemented Gravel clay	NO	120	220	100
Cemented Gravel	Yes	220	360	140

NAD 27
40.874883° N
117.743283° W

9. WELL CONSTRUCTION

Depth Drilled 360 Feet Depth Cased 360 Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet	Feet
<u>10 7/8</u>	0	360		

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>ø188</u>	0	20
<u>6 3/8</u>	<u>PVC</u>	<u>Sched 40</u>	20	360

Perforations:

Type of perforation Slot
Size of perforation .02

From	feet to	feet
<u>280</u>	<u>360</u>	

Annular Seal: Yes No

Material	to	to	Pumped	Poured
<input checked="" type="checkbox"/> Neat Cement	<u>0</u>	<u>50</u>	<input type="checkbox"/>	<input checked="" 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 50 to 360

Type: 3/8" pea gravel

Bentonite Chips: Yes No

Date started: 2-4-13, 20
Date completed: 2-13-13, 20

7. Water Level

Static water level: 218 feet below land surface

Artesian Flow: _____ G.P.M. _____ P.S.I.

Water Temperature: Cold °F

Quality: Clear

8. WELL TEST DATA

TEST METHOD:	Bailer	Pump	Air Lift	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>30</u>	<u>NA</u>	<u>2</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

Winnevocca NV 89445

Nevada contractor's license number 76778 issued by the State Contractor's Board

Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1563

Signed M. C. [Signature] By driller performing actual drilling on-site or contractor

Date 2-17-13