

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

OFFICE USE ONLY
Log No. 117603
Permit No. 82500T
Basin No. 032

PRINT OR TYPE IN BLACK INK 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. 70232
WELL NAME (If applicable): _____

1. OWNER/CLIENT NAME Flying W
MAILING ADDRESS 15000 Sand Pass Rd
Winnemucca, NV 89445

DETAILED ADDRESS AT WELL LOCATION 12500 Sand Pass Rd
Winnemucca, NV 89445
Subdivision Name: _____ County: Humboldt

2. PLS LOCATION NW ¼ NW ¼ 7 Sec 38N N/S 37 E
PERMIT/WAIVER NO. 82500-T
Issued by Water Resources Current Parcel No.

Latitude 41.19297 N UTM E NAD 27
Longitude 117.86581 W UTM N NAD 83/WGS 84

3. WORKED PERFORMED
 New Well Deepen: Orig WL# _____
 Replacement: Original well log # _____
 Recondition: Original well log # _____

4. PROPOSED USE
 Domestic Irrigation Monitor
 Mining / Dewater Com / Ind Stock
 Test / Other Mun / QM Rec

5. WELL TYPE
 Auger Rotary RVC
 Air Mud Sonic
 Other

6. LITHOLOGIC LOG

Material Encountered	Lost Circ.	Water Strata	From	To	Thick-ness
Clay			0	6	6
Sand			6	12	6
Gravel			12	26	14
Sand			26	29	
Gravel w/s Clay			29	36	7
Clay			36	42	6
Gravel			42	124	82
Course Sand			124	176	52
Sand Gravel			176	194	18
Sand w/s Clay			194	212	18
Sand		X	212	411	199
Sand w/s Clay		X	411	434	23
Sand		X	434	441	7
Brown Clay			441	456	15
Blue Clay			456	496	40
Brown Clay			496	502	6
Blue Clay			502	545	43

9. WELL CONSTRUCTION

Depth Drilled: 545 Feet Depth Cased: 545 Feet

HOLE DIAMETER (BIT SIZE)

From	To
<u>36</u> Inches	<u>0</u> Feet <u>50</u> Feet
<u>26</u> Inches	<u>50</u> Feet <u>545</u> Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>16</u>	<u>52.32</u>	<u>.312</u>	<u>0</u>	<u>545</u>
<u>30</u>	<u>118.76</u>	<u>.375</u>	<u>0</u>	<u>5</u>
<u>30</u>	<u>39.5</u>	<u>.109</u>	<u>5</u>	<u>45</u>

PERFORATIONS:
Type of perforation: Mill Cut
Size of perforation: 3/16
From 180 Feet To 420 Feet
From 525 Feet To 545 Feet

ANNULAR MATERIALS

Sanitary Seal 0 to 50 Pumped Poured
 Neat Cement _____ to _____ Pumped Poured
 Cement Grout 0 to 50 Pumped Poured
 Concrete Grout _____ to _____ Pumped Poured
 Bentonite Chips _____ to _____ Pumped Poured
 Bentonite Grout _____ to _____ Pumped Poured
 15% 20% Other, explain: _____
 Gravel Pack [> 0.2 in.] 0 to 545 Pumped Poured
 Sand Pack [< 0.2 in.] _____ to _____ Pumped Poured
 Other, explain: _____ to _____ Pumped Poured

Date started: 5-Aug , 20 13
Date completed: 9-Aug , 20 13

7. WATER QUALITIES
Static water level: 135 Feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: Cool ° Fahrenheit
Water Quality: unknown

8. WELL TEST DATA

Test Method: Bailor Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Recorded Time (Hours)
Customer did on his own.		
<u>NAD27</u>		
<u>41.1930689</u>		
<u>117.8641840</u>		

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision. This report is true to the best of my knowledge.
Name Parsons Drilling, Inc. Contractor
Address P.O. Box 1265 Fallon, NV 89407 Contractor
Nevada contractor's license number as issued by the State Contractor's Board: 29064
Nevada well driller's license number as issued by the Nevada Division of Water Resources (on site driller): 2307
Signed: [Signature]
By driller performing actual drilling on site or contractor
Date: 8/16/2013

(Rev. 08-12)

USE ADDITIONAL SHEETS IF NECESSARY

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By driller performing actual drilling on site or contractor
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