

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

OFFICE USE ONLY
Log No. 118291
Permit No. _____
Basin No. 087

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. 67153V
WELL NAME (if applicable): S-4

1. OWNER/CLIENT NAME Vista Canyon Group
MAILING ADDRESS 370 Van Gordon St.
Lakewood CO 80228

DETAILED ADDRESS AT WELL LOCATION
255 S Stanford Way Sparks NV
Subdivision Name: _____ County: Washoe

2. PLS LOCATION NE 1/4 NW 1/4 of Sec 19 T20 S 20 E
PERMIT/WAIVER NO. 032-220-62
Issued by Water Resources Current Parcel No.

Latitude 39 32.002' UTM E NAD 27
Longitude 119 44.609' 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
 Mining / Dewater
 Test / Other

PROPOSED USE
 Irrigation Monitor
 Com / Ind Stock
 Mun / QM Rec

5. WELL TYPE
 Auger Rotary RVC
 Mud Sonic
 Other

6. LITHOLOGIC LOG

Material Encountered	Lost Circ.	Water Strata	From	To	Thick-ness
Fill			0	4	
Cement-WOODS			4	6	
VOID			6	12	
GRAVEL - GREY			12	37	
GRAVEL - BROWN			37	68	
GRAVEL - DARK BROWN			68	89	
GRAVEL - LT BROWN			89	98	
CLAY SAND			98	119	

9. WELL CONSTRUCTION
Depth Drilled: 119 Feet
Depth Cased: 116 Feet
HOLE DIAMETER (BIT SIZE)
From 14" To 0"
Inches 119 Feet 0 Feet
Inches _____ Feet _____ Feet
Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>8"</u>		<u>SUN 80</u>	<u>0</u>	<u>116</u>

PERFORATIONS:
Type of perforation: SS
Size of perforation: .310
From 116 Feet To 16 Feet
From _____ Feet To _____ Feet
From _____ Feet To _____ Feet

ANNULAR MATERIALS

<input type="checkbox"/> Sanitary Seal <u>13</u> to <u>0</u>	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input checked="" type="checkbox"/> Neat Cement _____ to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> Cement Grout _____ to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> Concrete Grout _____ to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input checked="" type="checkbox"/> Bentonite Chips <u>19</u> to <u>12</u>	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> Bentonite Grout _____ to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> 15 % <input type="checkbox"/> 20 % <input type="checkbox"/> Other, explain: _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> Gravel Pack [> 0.2 in.] _____ to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input checked="" type="checkbox"/> Sand Pack [< 0.2 in.] <u>119</u> to <u>13</u>	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> Other, explain: _____ to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured

Date started: 2/3 20 13
Date completed: 2/27 20 13

7. WATER QUALITIES
Static water level: 17 Feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: _____ ° Fahrenheit
Water Quality: _____

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision. This report is true to the best of my knowledge.
Name Cascade Drilling LP. Contractor
Address 3632 Omecc Cir. Rancho Cordova CA 95742 Contractor
Nevada contractor's license number as issued by the State Contractor's Board: 73966
Nevada well driller's license number as issued by the Nevada Division of Water Resources (on-site driller): 2122
Signed: [Signature]
By driller performing actual drilling on site or contractor
Date: 2-9-13

8. WELL TEST DATA

Test Method: Bailor Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Recorded Time (Hours)
<u>39.53</u>	<u>119.74</u>	<u>3550W</u>