

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

OFFICE USE ONLY
 Log No. 120000
 Permit No. 83325T
 Basin 033A

PRINT OR TYPE ONLY

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. 71866

1. OWNER **Wilson Ranch**
 MAILING ADDRESS **9535 Hwy 95N Winnemucca, NV**

ADDRESS AT WELL LOCATION **Orovada NV**
 Subdivision Name: N/A County: **Humboldt**

2. LOCATION **NW¼NE¼ Sec27T42N/ R37E**
 PERMIT/WAIVER NO. **83325T** Parcel No. **N/A**
Issued by Water Resources

Latitude **41.495896** UTM E NAD 27
 Longitude **117.800929** N NAD 83/WGS 84

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Other

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

5. WELL TYPE
 Cable Rotary RVC
 Air Other

6. LITHOLOGIC LOG				
Material	Water Strata	From	To	Thick-ness
Clay		0	3	3
Cobbles & gravel		3	42	39
Sand & gravel		42	110	68
Clay		110	138	28
Cobbles		138	160	22
Clay		160	180	20
Gravel & Sand	X	180	220	40
Clay		220	230	10
Course gravel	X	230	300	70

9. WELL CONSTRUCTION
 Depth Drilled **300** Feet Depth Cased **300** Feet
 HOLE DIAMETER (BIT SIZE)
 From **10 5/8** Inches To **0** Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	10	.188	18"	300

Perforations:
 Type of perforation **Factory Cut**
 Size of perforation **3/32 x 4**
 From 260 feet to 300 feet
 From _____ feet to _____ feet

Annular Seal: Yes No
 Neat Cement _____ to _____ Pumped Poured
 Cement Grout _____ to _____ Pumped Poured
 Concrete Grout _____ to _____ Pumped Poured
 ≥30% Bentonite Grout _____ to _____ Pumped Poured
 Gravel Pack: Yes No **50** to **300** Pumped Poured
 Type: _____
 Bentonite Chips: Yes No _____ to _____ Pumped Poured
 Type: _____

Date started: **April 4, 20 14**
 Date completed: **April 7, 20 14**

7. Water Level
 Static water level: **200** feet below land surface
 Artesian Flow: **N/A** G.P.M. **N/A** P.S.I.
 Water Temperature: **Cool** °F
 Quality: **Good**

8. WELL TEST DATA			
TEST METHOD:	Bailer	Pump	Air Lift
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	Draw Down (Feet Below Static)		Time (Hours)
	15-20		4

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name **Fred Anderson Drilling, Inc.**
(CONTRACTOR)

Address **10760 S. Grass Valley Road**
(CONTRACTOR)
Winnemucca, NV 89445
 Nevada contractor's license number issued by the State Contractor's Board **021467**
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **2083**
 Signed _____
 By _____ performing actual drilling on site or contractor
 Date **April 8, 2014**