

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

OFFICE USE ONLY
Log No. 122325
Permit No. _____
Basin No. 103

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. 68175
WELL NAME (if applicable): _____

1. OWNER/CLIENT NAME Jesse Hunter
MAILING ADDRESS 8100 Taylor
Stagecoach NV 89429

DETAILED ADDRESS AT WELL LOCATION 8100 Taylor
Subdivision Name: _____ County: Nev

2. PLS LOCATION SE 1/4 NE 1/4 17 Sec 17 N/S 23 E
PERMIT/WAIVER NO. 019-373-10
Issued by Water Resources Current Parcel No.

Latitude 39 21 26 S UTM E NAD 27
Longitude 119 21 26 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
 Mining / Dewater
 Test / Other

5. WELL TYPE
 Auger Rotary RVC
 Air Mud Sonic
 Other

6. LITHOLOGIC LOG

Material Encountered	Lost Circ.	Water Strata	From	To	Thickness
<u>SAND</u>			<u>110</u>	<u>132</u>	
<u>clay-SAND</u>			<u>132</u>	<u>147</u>	
<u>small gravel</u>			<u>147</u>	<u>165</u>	
<u>course SAND-clay</u>			<u>165</u>	<u>210</u>	
<u>deepens unknown log</u>					
<u>Mar 77</u>					
<u>39.354501N</u>					
<u>119.361784W</u>					

9. WELL CONSTRUCTION

Depth Drilled: 100 Feet Depth Cased: 100 Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To
<u>8 7/8</u>	<u>110</u>	<u>210</u>

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 5/8</u>	<u>13</u>	<u>.188</u>	<u>95</u>	<u>210</u>

PERFORATIONS:

Type of perforation: factory cut
Size of perforation: 3/32 x 3
From 170 Feet To 210 Feet
From _____ Feet To _____ Feet
From _____ Feet To _____ Feet

ANNULAR MATERIALS

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

Pumped Poured
 Pumped Poured
 Pumped Poured
 Pumped Poured
 Pumped Poured

Date started: Sept 20, 20 14
Date completed: Sept 22, 20 14

7. WATER QUALITIES
Static water level: 90 Feet below land surface
Artesian Flow: NA G.P.M. NA P.S.I.
Water Temperature: COOL ° Fahrenheit
Water Quality: clear

8. WELL TEST DATA

Test Method:	G.P.M.	Draw Down (Feet Below Static)	Recorded Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	<u>207</u>		<u>2 hrs</u>

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision. This report is true to the best of my knowledge.
Name: Blain Drilling Contractor
Address: 201255 CCW 89202 Contractor
Nevada contractor's license number as issued by the State Contractor's Board: 46488A
Nevada well driller's license number as issued by the Nevada Division of Water Resources (on-site driller): 2159
Signed: THOR
Date: Sept 30 2014
By driller performing actual drilling on site or contractor