

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

OFFICE USE ONLY
Log No. 127602
Permit No. _____
Basin No. 041

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. 73452
WELL NAME (if applicable): _____

1. OWNER/CLIENT NAME Pick Beckerdite
MAILING ADDRESS 3260 Sunrise Dr
Carson City NV 89706

DETAILED ADDRESS AT WELL LOCATION lot 2 Block B
Ruby Valley NV 89833
Subdivision Name: Ruby Lake estates County: Elko

2. PLS LOCATION NW 1/4 SE 1/4 9 Sec 280 S 58 E
PERMIT/WAIVER NO. 004-03A-004
Issued by Water Resources Current Parcel No.

Latitude N 40° 19.247 UTM E NAD 27
Longitude W 115° 26.297 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
Sand			0	35	35
Sand / Gravel		40	35	55	20
Brown Clay		55	55	58	3
Sand / Gravel		62	58	118	60
Brown Clay		94	118	120	2
large gravel / sand		123	120	140	20
		131			

9. WELL CONSTRUCTION
Depth Drilled: 140 Feet
Depth Cased: 140 Feet
HOLE DIAMETER (BIT SIZE)
10 5/8 Inches From 0 To 140 Feet
Inches Feet Feet Feet
Inches Feet Feet Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6.625</u>	<u>8</u>	<u>.188</u>	<u>+18</u>	<u>140</u>

PERFORATIONS:
Type of perforation: mill slot
Size of perforation: 3 By 3/16
From 120 Feet To 140 Feet
From _____ Feet To _____ Feet
From _____ Feet To _____ Feet

ANNULAR MATERIALS
 Sanitary Seal 0 to 55
 Neat Cement 5 to 25 Pumped Poured
 Cement Grout _____ to _____ Pumped Poured
 Concrete Grout _____ to _____ Pumped Poured
 Bentonite Chips 25 to 55 Pumped Poured
 Bentonite Grout _____ to _____ Pumped Poured
 15 % 20 % Other, explain: _____
 Gravel Pack [> 0.2 in.] 55 to 140 Pumped Poured
 Sand Pack [< 0.2 in.] _____ to _____ Pumped Poured
 Other, explain: _____ to _____ Pumped Poured

Date started: 5-20 , 20 15
Date completed: 5-21 , 20 15

7. WATER QUALITIES
Static water level: 20 Feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: 47 ° Fahrenheit
Water Quality: _____

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>75</u>		<u>8</u>

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision. This report is true to the best of my knowledge.
Name Rosenlund Drilling L.L.C. Contractor
Address Hc 60 Box 890 Ruby Valley NV 89833 Contractor
Nevada contractor's license number as issued by the State Contractor's Board: 0079932
Nevada well driller's license number as issued by the Nevada Division of Water Resources (on-site driller): 2465
Signed: Sagan Rosenlund
By driller performing actual drilling on site or contractor
Date: 5-22-15