

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

OFFICE USE ONLY  
Log No. 122695  
Permit No. \_\_\_\_\_  
Basin No. 107

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. 68778  
WELL NAME (if applicable): \_\_\_\_\_

1. OWNER/CLIENT NAME George Rice  
MAILING ADDRESS PO 387 Wellington NV

DETAILED ADDRESS AT WELL LOCATION # 35 Colony Estates Dr. Wellington NV, 89447

2. PLS LOCATION NW 1/4 SE 1/4 34 Sec 11 OS 23 E  
PERMIT/WAIVER NO. 1009-14105  
Issued by Water Resources Current Parcel No.

Subdivision Name: \_\_\_\_\_ County: Lyon  
Latitude 3846.278 UTM E  NAD 27  
Longitude 11973.591 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  
 Irrigation  Monitor  
 Com / Ind  Stock  
 Mun / QM  Rec

5. WELL TYPE  
 Rotary  RVC  
 Mud  Sonic  
 Auger  Air  Other

6. LITHOLOGIC LOG

Material Encountered	Lost Circ.	Water Strata	From	To	Thick-ness
Dig & Gravel			205	246	41
Brown Clay			246	254	8
Sand & Chip rock			254	298	44
Sand & Brown Clay			298	310	12
Sand & Multi Colored chips, sum clay			310	350	40
Nad 27 38, 771390° N 119, 392188° W					

9. WELL CONSTRUCTION  
Depth Drilled: 350 Feet Depth Cased: 350 Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet	Feet
<u>5 7/8</u>	<u>205</u>	<u>350</u>		

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>5</u>		<u>.188</u>	<u>90</u>	<u>350</u>

PERFORATIONS:  
Type of perforation: Factory Cut  
Size of perforation: 3/32  
From 350 Feet To 310 Feet  
From 290 Feet To 270 Feet

ANNULAR MATERIALS

<input type="checkbox"/> Sanitary Seal <u>NA</u> to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input 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 type="checkbox"/> Bentonite Chips _____ to _____	<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"/> Gravel Pack [ > 0.2 in. ] _____ to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> Sand Pack [ < 0.2 in. ] _____ to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> Other, explain: _____ to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured

Date started: 6-17, 20 15  
Date completed: 6-20, 20 15

7. WATER QUALITIES  
Static water level: 140 Feet below land surface  
Artesian Flow: No G.P.M. 25 P.S.I.  
Water Temperature: 67 ° Fahrenheit  
Water Quality: Clear

8. WELL TEST DATA

Test Method:	Bailer	Pump	Air Lift	G.P.M.	Draw Down (Feet Below Static)	Recorded Time (Hours)
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>25</u>		<u>3 1/2</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 & PUMP CO INC.  
Address: P.O. Box 1255 Carson City, NV 89702

Nevada contractor's license number as issued by the State Contractor's Board: 46497A  
Nevada well driller's license number as issued by the Nevada Division of Water Resources (on-site driller): 2514  
Signed: Bob Gallina  
Date: 7-5-15