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

OFFICE USE ONLY
Log No. 122857
Permit No.
Basin No. 134

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. 71329
WELL NAME *(If applicable)*:

1. OWNER/CLIENT NAME Hendrix Ranch
MAILING ADDRESS 911 N Downs Ln
Fallon, NV 89406

DETAILED ADDRESS AT WELL LOCATION Smith Creek
*Subdivision Name:* *County:* Lander

2. PLS LOCATION SW ¼ NW ¼ 3 Sec 17 N/S 29 E
PERMIT/WAIVER NO. *Issued by Water Resources* *Current Parcel No.*

Latitude 39.3693 UTM E ☐ NAD 27
Longitude -117.586 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 |
|---|---|---|---|---|
| Gravel | | | 0 | 35 |
| Gravel w/Clay | | | 35 | 38 |
| Gravel | | | 38 | 120 |
| Clay | | | 120 | 125 |
| Gravel w/streaks of clay | | | 125 | 178 |
| Red Rock | | | 178 | 180 |
| Plugged bore hole with 20% | | | | |
| Bentonite Grout from 20-180ft. | | | | |
| Neat cement from 0-20ft. | | | | |
| Nad 27 | | | | |
| 39.369376 N | | | | |
| 117.585061 W | | | | |

Date started: 18-Jun , 20 15
Date completed: 22-Jun , 20 15

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

8. WELL TEST DATA
*Test Method:* ☐ Bailer ☐ Pump ☐ Air Lift

| G.P.M. | Draw Down (Feet Below Static) | Recorded Time (Hours) |
|---|---|---|
| | | |

9. CONSTRUCTION
Depth Drilled: 180 Feet Depth Cased: 0 Feet

*HOLE DIAMETER (BIT SIZE)*

| | | From | | To | |
|---|---|---|---|---|---|
| 6 1/4 | Inches | 0 | Feet | 180 | Feet |
| | Inches | | Feet | | Feet |
| | Inches | | Feet | | Feet |

*CASING SCHEDULE*

| Size O.D. (Inches) | Weight/Ft. (Pounds) | Wall Thickness (Inches) | From (Feet) | To (Feet) |
|---|---|---|---|---|
| | | | | |
| | | | | |
| | | | | |

*ANNULAR MATERIALS*
Sanitary Seal ☐ Yes ☐ No

| | | | | |
|---|---|---|---|---|
| ☐ Neat Cement | to | | ☐ Pumped | ☐ Poured |
| ☐ Cement Grout | to | | ☐ Pumped | ☐ Poured |
| ☐ Concrete Grout | to | | ☐ Pumped | ☐ Poured |
| ☐ Bentonite Chips | to | | ☐ Pumped | ☐ Poured |
| ☐ Gravel Pack [ > 0.2 in. ] | to | | ☐ Pumped | ☐ Poured |
| ☐ Sand Pack [ < 0.2 in. ] | to | | ☐ Pumped | ☐ Poured |
| ☐ Other, explain: | to | | ☐ Pumped | ☐ Poured |

*PERFORATIONS:*
Type of perforation: N/A
Size of perforation:
From Feet To Feet
From Feet To Feet
From Feet To Feet
From Feet To Feet
From Feet To Feet

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision. This report is true to the best of my knowledge.
Name Parsons Drilling, Inc. *Contractor*
Address P.O. Box 1265 Fallon, NV 89406 *Contractor*
Nevada contractor's license number as issued by the *State Contractor's Board:* 29064
Nevada well driller's license number as issued by the *Nevada Division of Water Resources (on-site driller):* 1753
Signed: *By driller performing actual drilling on site or contractor*
Date: 7/16/2015

RECEIVED 2015 AUG 10 PM 1:13 STATE ENGINEER'S OFFICE

(Rev. 12-13) USE ADDITIONAL SHEETS IF NECESSARY pg. of pg.