WHITE—DIVISION OF WATER RESOURCES
CANARY—CLIENT'S COPY
PINK—WELL DRILLER'S COPY

STATE OF NEVADA
DIVISION OF WATER RESOURCES

WELL DRILLERS REPORT

Please complete this form in its entirety

OFFICE USE ONLY
Log No. 26732
Permit No.
Basin 0-137A Fish Lake Valley

1. OWNER Steam Reserve Company ADDRESS

2. LOCATION ~~NW~~ SW ¼ ~~NE~~ ¼ Sec. 29 T. 1 N/S R. 38½ E. Esmeralda County
PERMIT NO. 47029

3. TYPE OF WORK
New Well ☐ Recondition ☐
Deepen ☐ Other ☒ ABANDON WELL

4. PROPOSED USE
Domestic ☐ Irrigation ☐ Test ☒
Municipal ☐ Industrial ☐ Stock ☐

5. TYPE WELL
Cable ☐ Rotary ☒
Other ☐

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
ABANDON WELL				
BY CEMENTING WELL				
FROM BOTTOM TO				
TOP				
PULLED 720 FEET				
3½ PIPE FROM WELL				
THEN INSTALLED				
11 YARDS CEMENT				
GROUT DOWN WELL				

Date started 3 15, 1986
Date completed 3 19, 1986

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump

BAILER TEST
G.P.M. ..... Draw down ..... feet ..... hours
G.P.M. ..... Draw down ..... feet ..... hours
G.P.M. ..... Draw down ..... feet ..... hours

8. WELL CONSTRUCTION
Diameter hole 6⅛ inches Total depth 760 feet
Casing record
Weight per foot ..... Thickness

Diameter	From	To
inches	feet	feet
inches	feet	feet
inches	feet	feet
inches	feet	feet
inches	feet	feet
inches	feet	feet

Surface seal: Yes ☒ No ☐ Type Cement Grout
Depth of seal ..... feet
Gravel packed: Yes ☐ No ☐
Gravel packed from ..... feet to ..... feet

Perforations:
Type perforation
Size perforation
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet

9. WATER LEVEL
Static water level ..... Feet below land surface
Flow ..... G.P.M.
Water temperature ..... ° F. Quality

10. DRILLERS CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.

Name Fred Anderson
Address 711 W 1400 So Woods Cross Utah 84087
Nevada contractor's license number 21647
Nevada driller's license number 0375
Signed [signature]
Date 3-19-86

USE ADDITIONAL SHEETS IF NECESSARY

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