

OFFICE USE ONLY
 Log No. 46330
 Permit No. _____
 Basin 029

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

WELL DRILLER'S REPORT

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. 26881

1. OWNER Gary Graves/High Desert Ranch ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS Star Route 396 Hwy 140 North 20 miles S.E. of Denio
Winnemucca, NV 89445
 2. LOCATION NW 1/4 NW 1/4 Sec. 2 T. 43 N. 31 E Humboldt County
 PERMIT NO. _____ High Desert Ranch _____
 Issued by Water Resources Parcel No. Subdivision Name

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Abandon Other _____
 4. PROPOSED USE
 Domestic Irrigation Test
 Municipal/Industrial Monitor Stock
 5. WELL TYPE
 Cable Rotary RVC
 Air Other _____

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
sand		0	8	8
clay		8	12	4
sand		12	15	3
sandy clay		15	25	10
sand & gravel		25	30	5
sandy clay		30	80	50
clay w/sand layers		80	130	50
sand & gravel		130	150	20
brown clay w/gravel		150	164	14
brown clay w/sand		164	185	21
sand w/clay stringers		185	250	65
brown clay w/sand layers		250	255	5
sand		255	275	20
sand w/clay layers		275	290	15
clay		290	295	5
sandy clay		295	330	35
clay w/sand layers		330	345	15
sand w/clay lenses		345	355	10
sandy clay		355	500	145

8. WELL CONSTRUCTION
 Depth Drilled 500 Feet Depth Cased 355 Feet
 HOLE DIAMETER (BIT SIZE)
 From To
10 Inches 0 Feet 500 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	12.92	.188	+2	213

Perforations:
 Type perforation mill slot
 Size perforation 3 x 1/8
 From 213 feet to 355 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 50 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 0 feet to 500 feet

9. WATER LEVEL
 Static water level 130 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature norm °F Quality good

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Humboldt Drilling & Pump Co., Inc. Contractor
 Address P. O. Box 590 Contractor
Winnemucca, NV 89446

Nevada contractor's license number issued by the State Contractor's Board 015234
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1713
 Signed C. C. Epler
 By driller performing actual drilling on site or contractor
 Date 9-24-94

Date started 8/24, 1994
 Date completed 8/26, 1994

7. WELL TEST DATA

TEST METHOD: <input checked="" type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift		
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
30		3 hrs