

OFFICE USE ONLY
 Log No. 48562
 Permit No. 1049
 Basin I

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. 32146

1. OWNER George Lewis ADDRESS AT WELL LOCATION On Last Chance
 MAILING ADDRESS 570 S. 8th Street Road
Elko, NV 89801
 2. LOCATION SE 1/4 SW 1/4 Sec. 12 T. 34 R. 55 E. Elko County
 PERMIT NO. 32-001-016 Last Chance #3
 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 | Thick-ness |
|--------------------------|--------------|------|-----|------------|
| Silty clay | | 0 | 35 | 35 |
| Gravel | | 35 | 40 | 5 |
| Brown clay and siltstone | | 40 | 95 | 55 |
| Siltstone and pea gravel | X | 95 | 140 | 45 |

8. WELL CONSTRUCTION
 Depth Drilled 140 Feet Depth Cased 140 Feet
 HOLE DIAMETER (BIT SIZE)
 From To
10-5/8 Inches 0 Feet 140 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 | 13 | .188 | +1-1/2 | 140 |

Perforations:
 Type perforation Millslots
 Size perforation 3/16 x 3" x 6 row
 From 120 feet to 140 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 50 feet to 140 feet

9. WATER LEVEL
 Static water level 30 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature C °F Quality good

Date started August 15, 1995
 Date completed August 17, 1995

7. WELL TEST DATA

| TEST METHOD: <input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift | | |
|---|-------------------------------|--------------|
| G.P.M. | Draw Down (Feet Below Static) | Time (Hours) |
| Blow test 30 | 28' | 3 hours |

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name HACKWORTH DRILLING, INC. Contractor
 Address P.O. Box 850 Contractor
Elko, NV 89803
 Nevada contractor's license number 020582
 issued by the State Contractor's Board
 Nevada driller's license number issued by the 1654
 Division of Water Resources, the on-site driller
 Signed John Craig Davis
 By driller performing actual drilling on site or contractor
 Date 8-18-95