

OFFICE USE ONLY
 Log No. 30530
 Permit No. _____
 Basin. 05D

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: 32025

1. OWNER P.S.F. Limited Liabilities ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS 1920 Thomas Ave. Suite 420
Cheyenne, WY 82001
 2. LOCATION NE 1/4 N.W 1/4 Sec 25 T. 33 S. R. 52 E. ELKO County _____
 PERMIT NO. R-254 Issued by Water Resources Parcel No. _____ Subdivision Name None

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
Soil		0	2	2
Sandy clay		2	17	15
Sand	<u>rv</u>	17	20	3
Sandy clay		20	35	15
Sand & gravel	<u>rv</u>	35	44	9
Sand clay w/ thin streaks of sand & gravel	<u>rv</u>	44	106	62
<u>T.P. 106</u>				

8. WELL CONSTRUCTION
 Depth Drilled 106 Feet Depth Cased 108 Feet
 HOLE DIAMETER (BIT SIZE)
 From To
12 Inches 0 Feet 32 Feet
10 Inches 32 Feet 45 Feet
8 Inches 45 Feet 106 Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>8 5/8</u>		<u>.188</u>	<u>12</u>	<u>106</u>

Perforations:
 Type perforation Mill slots
 Size perforation 1/8 x 3
 From _____ feet to _____ feet
 From 20 feet to 10.5 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type:
 Depth of Seal 20 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level 14 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature cold °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 MUTH DRILLING Co. Contractor
 Address 203 PINE ST. Contractor
ELKO 89801
 Nevada contractor's license number issued by the State Contractor's Board 10819
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 632
 Signed James V. Muth
 By driller performing actual drilling on site or contractor
 Date 7-25-95

Date started 7-18, 1995
 Date completed 7-25, 1995

7. WELL TEST DATA

TEST METHOD: <input checked="" type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift			
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)	
<u>75</u>	<u>12</u>	<u>1 hour</u>	

RECEIVED
 25 SEP - 6 AM 17
 STATE ENGINEERS OFFICE