

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. 37216

1. OWNER Bloomington Gas Power ADDRESS AT WELL LOCATION \_\_\_\_\_  
 MAILING ADDRESS 9790 Gateway Dr  
Suite 240 Reno NV 89571

2. LOCATION SE 1/4 SW 1/4 Sec 17 T. 31 N. R. 48 E. ELKO CO County  
 PERMIT NO. \_\_\_\_\_ VULCAN # 1 + #3 + #31-17  
 Issued by Water Resources Parcel No. \_\_\_\_\_ Subdivision Name \_\_\_\_\_

3. WORK PERFORMED  
 New Well  Replace  Recondition  
 Deepen  Abandon  Other \_\_\_\_\_

4. PROPOSED USE  
 Domestic See  Irrigation  Test  
 Municipal/Industrial  Monitor  Stock

5. WELL TYPE  
 Cable  Rotary  RVC  
 Air  Other \_\_\_\_\_

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
VULCAN #1 TAB BOTTOM				
@ 350' DRY HOLE				
FILL TO SURFACE w/ Cement			12 yds	
VULCAN #3 TAB BOTTOM				
@ 510' DRY HOLE				
FILL TO SURFACE w/ Cement			4.5 yds	
# 31-47 TAB BOTTOM				
@ 301' DRY HOLE				
FILL TO SURFACE w/ Cement			7 yds	
			3-12-04	

8. WELL CONSTRUCTION

Depth Drilled \_\_\_\_\_ Feet Depth Cased \_\_\_\_\_ Feet

HOLE DIAMETER (BIT SIZE)

From \_\_\_\_\_ To \_\_\_\_\_

\_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	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

Surface Seal:  Yes  No Seal Type:  
 Neat Cement  
 Cement Grout  
 Concrete Grout

Depth of Seal \_\_\_\_\_  
 Placement Method:  Pumped  Poured

Gravel Packed:  Yes  No  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

9. WATER LEVEL

Static water level: DRY \_\_\_\_\_ feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature \_\_\_\_\_ °F Quality \_\_\_\_\_

Date started 9-22-98 19\_\_\_\_  
 Date completed 9-23-98 19\_\_\_\_

7. WELL TEST DATA

TEST METHOD:  Bailer  Pump  Air Lift

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

10. DRILLER'S CERTIFICATION

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

Name JAA Dig + E. Smith Contractor  
 Address Box 4 + 87 ELKO NV 89803 Contractor

Nevada contractor's license number issued by the State Contractor's Board: 20680  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller: 7112

Signed Robby Ferrell By driller performing actual drilling on site or contractor  
 Date 9-6-98