

MW-10

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

STATE OF NEVADA
DIVISION OF WATER RESOURCES



OFFICE USE ONLY

Log No. 95496
Permit No. _____
Basin. 42

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. 54931

1. OWNER Featless Farms Corporation ADDRESS AT WELL LOCATION _____
MAILING ADDRESS P.O. Box 7627
Boise Idaho 83707
2. LOCATION NW 1/4 SE 1/4 Sec 10 T. 37N NS R. 62 E EIRO County
PERMIT NO. M10-1345 002-760-001 Subdivision Name _____
Issued by Water Resources Parcel No. _____

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 Direct Push

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
<u>Gray Sandy Gravel</u>		<u>0</u>	<u>1.5</u>	
<u>Gray Clayey Gravelly Sand</u>		<u>1.5</u>	<u>2.6</u>	
<u>Brown to Gray Clayey Sand</u>		<u>2.6</u>	<u>11.5</u>	
<u>Clay Gravelly Sand</u>		<u>11.5</u>	<u>12.7</u>	
<u>Dark Gray Sandy Clay</u>		<u>12.7</u>	<u>13.9</u>	
<u>Clayey Gravelly Sand</u>		<u>12.9</u>	<u>15</u>	

GPS 11T 0671270
41M 4552129

8. WELL CONSTRUCTION
Depth Drilled 15 Feet Depth Cased 15 Feet
HOLE DIAMETER (BIT SIZE)
From To
10 Inches 0 Feet 1 Feet
3.5 Inches 1 Feet 15 Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>1.875</u>		<u>sch 40 PVC</u>	<u>.25</u>	<u>5</u>

Perforations:
Type perforation Factory Slotted (PVC)
Size perforation .020
From 5 feet to 15 feet
From _____ feet to _____ feet

Surface Seal: Yes No Seal Type: Neat Cement Cement Grout Concrete Grout
Depth of Seal: 2 FT Bentonite 1-3
Placement Method: Pumped Poured 01 Flush Completion
Gravel Packed: Yes No
From 3 (10-20) feet to 15 ft feet

9. WATER LEVEL
Static water level 11.65 BGS feet below land surface
Artesian flow _____ G.P.M. _____ P.S.I.
Water temperature _____ °F Quality _____

Date started Dec. 14, 2004
Date completed Dec. 14, 2004

7. WELL TEST DATA

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

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name Layne Christensen Company Contractor
Address 4490 West 1707 South
Salt Lake City Utah 84104 Contractor
Nevada contractor's license number issued by the State Contractor's Board 0019101
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1970
Signed Wilburn L. Franklin
By driller performing actual drilling on site or contractor
Date Dec. 14, 2004