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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. 44116

1. OWNER Great Basin College Foundation ADDRESS AT WELL LOCATION 275 West Williams Ave, Fallon NV 89406-2933  
MAILING ADDRESS P.O. Box 2056  
Elko NV 89803-2056  
2. LOCATION 1/4 Sec 19 N 19 E Churchill County  
PERMIT NO. S-000024 001-532-07 12-20-07 Subdivision Name N/A

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 W-3

Material	Water Strata	From	To	Thick-ness
<u>A/C</u>		<u>0</u>	<u>0.5'</u>	<u>0.5"</u>
<u>siltysand brown</u>		<u>0.5'</u>	<u>2'</u>	<u>2'</u>
<u>sandysilt grey</u>		<u>2'</u>	<u>4.5'</u>	<u>2.5'</u>
<u>sand brown</u>	<u>7'</u>	<u>4.5'</u>	<u>19.5'</u>	<u>15'</u>

8. WELL CONSTRUCTION  
Depth Drilled 19.5 Feet Depth Cased 19.5 Feet  
HOLE DIAMETER (BIT SIZE)  
From 8.5 Inches To 19.5 Feet  
Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>2.375</u>	<u>0.70</u>	<u>0.308</u>	<u>0</u>	<u>19.5</u>

Perforations:  
Type perforation slotted screened  
Size perforation 0.020 inch  
From 4.5 feet to 19.5 feet  
From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  
Depth of Seal 0-1.5 (beentou.k)  Neat Cement  
Placement Method:  Pumped (0.5-1.5)  Cement Grout  
 Poured  Concrete Grout

Gravel Packed:  Yes  No  
From 1.5 feet to 19.5 feet

9. WATER LEVEL  
Static water level 7' feet below land surface  
Artesian flow NO G.P.M. \_\_\_\_\_ P.S.I.  
Water temperature warm °F Quality Murky

Date started 1/17/2006  
Date completed 1/17/2006

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 Dale A Lehman Contractor  
Address 520 Edison Way Contractor  
Reno NV 89502  
Nevada contractor's license number \_\_\_\_\_  
issued by the State Contractor's Board \_\_\_\_\_  
Nevada driller's license number issued by the Division of Water Resources, the on-site driller M-1976  
Signed Dale A Lehman  
By driller performing actual drilling on site or contractor  
Date 1/18/06