

STATE OF NEVADA
 DIVISION OF WATER RESOURCES
 WELL DRILLER'S REPORT

OFFICE USE ONLY

Log No. 101582
 Permit No. _____
 Basin 071

PRINT OR TYPE ONLY

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. **58455**

1. OWNER **John Welch** ADDRESS AT WELL LOCATION **3905 E. Commander Winnemucca, NV 89446**
 MAILING ADDRESS **PO Box 3676** **Winnemucca, NV 89446**
 Subdivision Name: _____ County: **Humboldt**

2. LOCATION **SE¼SE¼ Sec13T35N/S R37E** Latitude **40 54.072** UTM E **4405** NAD 27
 PERMIT/WAIVER NO. **013-591-07** Longitude **117 45.458** N NAD 83/WGS 84
 Issued by Water Resources Parcel No. _____

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen 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
Sand & gravel		0	3	3
Boulder		3	10	7
Cobles & sand		10	60	50
Clay & gravel		60	80	20
Cobles & sand		80	160	80
Gravel		160	170	10
Clay & cobles		170	190	20
Boulders		190	210	20
Gravel & clay	x	210	230	20
Boulders		230	240	10
Cobles & Sand		240	270	30
Gravel & clay	x	270	285	15
Gravel & clay		285	297	12

9. WELL CONSTRUCTION

Depth Drilled **297** Feet Depth Cased **297** Feet

HOLE DIAMETER (BIT SIZE)
 From _____ To _____
12 5/8 Inches **0** Feet **297** Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8 5/8	20	188	+1	20
8 5/8	13.27	.632	20	297

Perforations:
 Type of perforation **Factory cut slit**
 Size of perforation **0.50**
 From **237** feet to **297** feet
 From _____ feet to _____ feet

Annular Seal: Yes No

Neat Cement _____ to **50** Pumped Poured
 Cement Grout _____ to _____ Pumped Poured
 Concrete Grout _____ to _____ Pumped Poured
 ≥30% Bentonite Grout _____ to _____ Pumped Poured
 Gravel Pack: Yes No **50** to **297** Pumped Poured
 Type: _____
 Bentonite Chips: Yes No _____ to _____ Pumped Poured
 Type: _____

Date started: **August 09, 20 06**
 Date completed: **August 14, 20 06**

7. Water Level

Static water level: **165** feet below land surface
 Artesian Flow: **N/A** G.P.M. **N/A** P.S.I.
 Water Temperature: **Cool** °F
 Quality: **Fair**

8. WELL TEST DATA

TEST METHOD:	Bailer	Pump	Air Lift
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Draw Down (Feet Below Static)		
G.P.M.	Time (Hours)		
34	165		
	7		

10. DRILLER'S CERTIFICATION

This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name **Fred Anderson Drilling, Inc.**
 (CONTRACTOR)
 Address **10760 S. Grass Valley Road**
 (CONTRACTOR)
Winnemucca, NV 89445
 Nevada contractor's license number issued by the State Contractor's Board **021467**
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **2083**

Signed _____
 By driller performing actual drilling on site or contractor
 Date **August 28, 2006**