

Log No. 102 100

Permit No. \_\_\_\_\_

Basin. Q05

003618  
 PRINT OR TYPE ONLY  
 DO NOT WRITE ON BACK

4wrcs

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. 30668

1. OWNER WARREN EIZMAN ADDRESS AT WELL LOCATION \_\_\_\_\_  
 MAILING ADDRESS 350 FRONT ST, CALIENTE NV 350 FRONT ST, CALIENTE, NV  
 2. LOCATION SW 1/4 NW 1/4 Sec. 8 T. 09 N. R. 67 E. LINCOLN County  
 PERMIT NO. 308904 Issued by Water Resources Parcel No. \_\_\_\_\_ Subdivision Name \_\_\_\_\_

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	Thickness
<u>ALLIED GYSLNG</u>				
<u>FILLED FROM BOTTOM TO TOP WITH BENTONITE CHIPS CEMENT SEAL ON TOP</u>				
<u>MAP BOTTOM WES 84</u>				
<u>SPI 37°36.852N 114°30.801 W</u>				
<u>P2 37°36.851N 114°30.805 W</u>				
<u>S3 37°36.851N 114°30.807 W</u>				
<u>S04 37°36.851N 114°30.803 W</u>				
<u>DONE/DWR RECEIVED</u>				
<u>JAN 13 2007</u>				

8. WELL CONSTRUCTION

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

HOLE DIAMETER (BIT SIZE)

From		To	
Inches	Feet	Inches	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  
 Placement Method:  Pumped  Poured  
 Gravel Packed:  Yes  No  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

LAS VEGAS OFFICE  
 Date started 01/08 2007  
 Date completed 01/08 2007

7. WELL TEST DATA

TEST METHOD:  Bailer  Pump  Air Lift

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

9. WATER LEVEL

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

10. DRILLER'S CERTIFICATION

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

Name EAGLE DRILLING SERVICES LLC Contractor  
 Address 7150 PLAZA ST LAS VEGAS, NV. 89119 Contractor  
 Nevada contractor's license number issued by the State Contractor's Board 51266  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller M-2272  
 Signed [Signature]  
 By driller performing actual drilling on site or contractor  
 Date 01/11/07