

Log No. 103744
 Permit No. _____
 Basin 207

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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. 56050

1. OWNER Bob & Carol McKenzie ADDRESS AT WELL LOCATION 114 N. Main Hwy 318
 MAILING ADDRESS P.O. Box 234 Lot 2 Block 9 Land town acre plat
Land NV 89317 NAD 22 N 78° 51' 38.3" W 115° 00' 24.3"
 2. LOCATION NW 1/4 NE 1/4 Sec 33 T 12 N/S R 62 E White Pine County
 PERMIT NO. N/A 006-018-14 Parcel No. Land town site 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	Thick-ness
Clay-Silt		0	9	
Cobbles		9	10	
Clay-Silt		10	33	
consolidated gravel	water	33	35	
Clay		35	43	
gravel	water	43	47	
Clay		47	74	
gravel	water	74	75	
Clay		75	77	
gravel	water	77	79	
Clay		79	82.5	
gravel	water	82.5	83	
Clay		83	85	
gravel	water	85	86	
Clay		86	88	
gravel		88	92	
Clay		92	100	

8. WELL CONSTRUCTION
 Depth Drilled 100 Feet Depth Cased 100 Feet
 HOLE DIAMETER (BIT SIZE)
 From To
10 Inches 0 Feet 50 Feet
8 Inches 50 Feet 100 Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6</u>	<u>129</u>	<u>.188</u>	<u>-1</u>	<u>19</u>
<u>6</u>		<u>sch 40 PVC</u>	<u>19</u>	<u>100</u>

Perforations:
 Type perforation Factory
 Size perforation .032
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From 60 feet to 100 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 50' Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 50 feet to 100 feet

9. WATER LEVEL
 Static water level 29.5 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature Low °F Quality good

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Maynard Well Drilling Contractor
 Address P.O. Box 64 Land NV 89317 Contractor
 Nevada contractor's license number issued by the State Contractor's Board 047226
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1556
 Signed Donna Maynard
 By driller performing actual drilling on site or contractor
 Date April 24-07

Date started March 12 2007
 Date completed April 14 2007

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>30</u>	<u>20.5</u>	<u>1 hr</u>

N38860639
W115.006750 NAD07

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