



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

OFFICE USE ONLY
Log No. 105434
Permit No. 51172 & 51173
Basin Ø83

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

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

NOTICE OF INTENT NO. 58656

1. OWNER Canyon General Improvement District ADDRESS AT WELL LOCATION Corner of Canyon Way & Truckee River
MAILING ADDRESS 400 Canyon Way in Lockwood, NV.
Sparks, NV. 89434 Subdivision Name: _____ County: Storey

2. LOCATION SE ¼ SE ¼ Sec 17 T 19N N/S R 21 E Latitude 39 30.564N UTM E NAD 27
PERMIT/WAIVER No. 34033-21636 Longitude 119 38.911W N NAD 83/WGS 84

Issued by Water Resources Parcel No. _____

3. WORKED PERFORMED
 New Well Replace Recondition
 Deepen Other

4. PROPOSED USE
 Domestic Irrigation Test Cable Rotary RVC
 Municipal/Industrial Monitor Stock Air Other

6. LITHOLOGIC LOG

| Material | Water Strata | From | To | Thick-ness |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|------|----|------------|
| see attached report | | | | |
| <i>Mobilize to site & remove 115' of 3" drop pipe & pump. Conduct video of well & found existing 8" casing severely deteriorated. Installed reverse pipe & cleaned out debris from 134' to 138' for total depth. Ran in 40' x 7 1/2" dummy to make sure casing would fit in well. Dummy went to depth of well with little resistance. New 1 1/2" casing arrived & installed 40' of millslot and 197' of blank. Casing material was Hi Strength Alloy. After casing was installed a plate was welded between the 3" & 7.5". Pump was reinstalled & connected into system</i> | | | | |
| <u>N 39.509508</u> | | | | |
| <u>W 119.647516 NAD27</u> | | | | |
| <u>Reconditioning of</u> | | | | |
| <u>log 25987</u> | | | | |

9. WELL CONSTRUCTION

Depth Drilled 138' Feet Depth Cased 137' Feet

HOLE DIAMETER (BIT SIZE)

| Inches | From | To | Feet | Feet |
|--------|-------|-------|-------|-------|
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |

CASING SCHEDULE

| Size O.D. (Inches) | Weight/Ft. (Pounds) | Wall Thickness (Inches) | From (Feet) | To (Feet) |
|--------------------|---------------------|-------------------------|-------------|-------------|
| <u>7.5"</u> | _____ | <u>.250</u> | <u>2</u> | <u>137'</u> |

Perforations:

| Type of perforation | Size of perforation | From | feet to | feet |
|---------------------|---------------------|------------|-------------|-------|
| _____ | <u>mill slot</u> | <u>97'</u> | <u>137'</u> | _____ |
| _____ | <u>1/8" x 3"</u> | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |

Annular Seal: Yes No

Neat Cement _____ to _____ Pumped Poured

Cement Grout _____ to _____ Pumped Poured

Concrete Grout _____ to _____ Pumped Poured

≥30% Bentonite Grout _____ to _____ Pumped Poured

Gravel Pack: Yes No _____ to _____ Pumped Poured

Type: _____

Bentonite Chips: Yes No _____ to _____ Pumped Poured

Type: _____

Date started: 27-Feb, 2008
Date completed: 27-Feb, 2008

7. Water Level
Static water level: 20' feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: _____ °F
Quality: _____

8. 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 Carson Pump
Contractor

Address P.O. Box 20159
Contractor

Carson City, NV. 89721

Nevada contractor's license number issued by the State Contractor's Board 39920

Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1482

Signed [Signature]
By driller performing actual drilling on site or contractor

Date 3/24/2008