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

OFFICE USE ONLY
Log No. 107486
Permit No.
Basin 131

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. 63708

1. OWNER Joe Savanha Corp
MAILING ADDRESS P.O. Box 356
Battle Mtn, NV 89820

ADDRESS AT WELL LOCATION Airport Well
Buffalo Valley
Subdivision Name: County: Lander

2. LOCATION se ¼ NE ¼ Sec 34 T 29N N/S R 41 E
PERMIT/WAIVER No. 13890 Issued by Water Resources
Parcel No.

Latitude 40.34511N
Longitude -117.34700W
UTM E N
☐ NAD 27 ☒ NAD 83/WGS 84

3. WORKED 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	Thickness
Fine Sand		50	58	8
Sand		58	81	23
gravel		81	95	14
Set in 8" Steel casing inside				
of old well 20" Cement casing				
Cement 8" Csaing for 50ft to surfa				
N 40.345193				
W 117.346067 NAD27				

Date started: 20-Oct, 20 08
Date completed: 21-Oct, 20 08

9. WELL CONSTRUCTION
Depth Drilled 95 Feet Depth Cased 95 Feet

HOLE DIAMETER (BIT SIZE)

		From		To	
7 7/8	Inches	50	Feet	95	Feet
	Inches		Feet		Feet
	Inches		Feet		Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
5	10.8	.188	-55	95
8 5/8	16.96	.188	-6	50

Perforations:
Type of perforation Mill Cut
Size of perforation 1/8"
From 75 feet to 95 feet
From feet to feet
From feet to feet
From feet to feet
From feet to feet

Annular Seal: ☒ Yes ☐ No
☐ Neat Cement to ☐ Pumped ☐ Poured
☐ Cement Grout to ☐ Pumped ☐ Poured
☒ Concrete Grout 0 to 50 ☒ Pumped ☐ Poured
☐ ≥30% Bentonite Grout to ☐ Pumped ☐ Poured

Gravel Pack: ☒ Yes ☐ No 0 to 95 ☐ Pumped ☒ Poured
Type: 3/8
Bentonite Chips: ☐ Yes ☒ No to ☐ Pumped ☐ Poured
Type:

7. Water Level
Static water level: 41 feet below land surface
Artesian Flow: G.P.M. P.S.I.
Water Temperature: cool °F
Quality: unknown

8. WELL TEST DATA
TEST METHOD: ☐ Bailer ☐ Pump ☒ Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
10		1hr

STATE ENGINEERS OFFICE
2008 NOV 13 AM 11:41
RECEIVED

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name Parsons Drilling, Inc. (Contractor)
Address P.O. Box 1265 (Contractor)
Fallon, NV 89407-1265
Nevada contractor's license number issued by the *State Contractor's Board* 29064
Nevada driller's license number issued by the Division of Water Resources, the *on-site driller* 2307
Signed (By driller performing actual drilling on site or contractor)
Date 10/28/2008

(Rev. 05-06)

USE ADDITIONAL SHEETS IF NECESSARY