

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

OFFICE USE ONLY **108876**

Log No. _____
 Permit No. _____
 Basin **Ø73**

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. **63789**

1. OWNER **Ron Ward**
 MAILING ADDRESS **6230 Ingleston Dr #225 Sparks NV**

ADDRESS AT WELL LOCATION
Lovelock, NV

2. LOCATION **SE¼NW¼ Sec 02 T24N / R30E**
 PERMIT/WAIVER NO. **005-13-103**
Issued by Water Resources

Subdivision Name: _____ County: **Churchill**
 Latitude **N39°97'39.408** UTM E NAD 27
 Longitude **W118°57'012** N NAD 83/WGS 84

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 | | 0 | 3 | 3 |
| Hard Clay | | 3 | 5 | 2 |
| Course sand/gravel | | 5 | 40 | 35 |
| course 3/8 gravel | | 40 | 80 | 40 |
| clay/blue | | 80 | 90 | 10 |
| sand/course gravel | X | 90 | 110 | 20 |
| Clay | | 110 | 112 | 2 |
| course sand/gravel | X | 112 | 140 | 28 |

9. WELL CONSTRUCTION

Depth Drilled **140** Feet Depth Cased **140** Feet

HOLE DIAMETER (BIT SIZE)

| From | To |
|------------------|-------------------------------|
| 11 Inches | 0 Feet 140 Feet |
| _____ Inches | _____ Feet _____ Feet |
| _____ Inches | _____ Feet _____ Feet |

CASING SCHEDULE

| Size O.D. (Inches) | Weight/Ft. (Pounds) | Wall Thickness (Inches) | From (Feet) | To (Feet) |
|--------------------|---------------------|-------------------------|-------------|------------|
| 6 5/8 | 10 | 188 | +1 | 20 |
| 6.625 | 4.06 | .316 | 20 | 140 |

Perforations:
 Type of perforation **Factory Cut Slots**
 Size of perforation **Ø50**

| From | To |
|--------------------|-----------------|
| 100 feet to | 140 feet |
| _____ feet to | _____ feet |
| _____ feet to | _____ feet |
| _____ feet to | _____ feet |
| _____ feet to | _____ feet |

Annular Seal: Yes No

| | | | |
|---|-----------------------|--|---------------------------------|
| <input checked="" type="checkbox"/> Neat Cement | 0 to 45 | <input checked="" type="checkbox"/> Pumped | <input type="checkbox"/> Poured |
| <input type="checkbox"/> Cement Grout | _____ to _____ | <input type="checkbox"/> Pumped | <input type="checkbox"/> Poured |
| <input type="checkbox"/> Concrete Grout | _____ to _____ | <input type="checkbox"/> Pumped | <input type="checkbox"/> Poured |
| <input type="checkbox"/> ≥30% Bentonite Grout | _____ to _____ | <input type="checkbox"/> Pumped | <input type="checkbox"/> Poured |

Gravel Pack: Yes No **55** to **140** Pumped Poured
 Type: _____

Bentonite Chips: Yes No **45** to **55** Pumped Poured
 Type: _____

Date started: **June 1, 20 09**
 Date completed: **June 4, 20 09**

7. Water Level
 Static water level: **37** feet below land surface
 Artesian Flow: **N/A** G.P.M. **N/A** P.S.I.
 Water Temperature: **Cool** °F
 Quality: **fair**

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)

8. WELL TEST DATA

| TEST METHOD: | G.P.M. | Time (Hours) |
|--|--------------|--------------|
| <input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift <small>Draw Down (Feet Below Static)</small> | 50-70 | 4 |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

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 *Fred Anderson*
 By driller performing actual drilling on site or contractor
 Date **July 3, 2009**