

STATE OF NEVADA
 DIVISION OF WATER RESOURCES

OFFICE USE ONLY
 Log No. 109479
 Permit No. _____
 Basin _____

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. 33197

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

1. OWNER **VARNER RICHARD** ADDRESS AT WELL LOCATION **1380 W. MOOSE**
 MAILING ADDRESS **1380 W. MOOSE**
PAHRUMP, NV 89048

2. LOCATION **NW** 1/4 **NE** 1/4 Sec. **29** T **20S** N/S R **53** E **NYE** County
 PERMIT NO. _____ Parcel No. **39-032-22** Subdivision Name **CALVADA VALLEY UNIT 88**
 Issued by Water Resources

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		0	23	23
CALICHIE		23	42	19
CLAY		42	80	38
CALICHIE	WB	80	88	8
CLAY		88	110	22
CALICHIE	WB	110	121	11
CLAY		121	146	25
CALICHIE	WB	146	158	12
CLAY		158	180	22
CALICHIE	WB	180	191	11
CLAY		191	214	23
CALICHIE	WB	214	230	16
CLAY		230	240	10

OLD WELL
 N 36° 11' 18.4"
 W 116° 02' 19.0"

8. WELL CONSTRUCTION
 Depth Drilled **240** Feet Depth Cased **240** Feet

HOLE DIAMETER (BIT SIZE)
 12" Inches From **0** Feet To **240** Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6"	3.63	.280	0	240

Perforations:
 Type perforation **SAW CUT**
 Size perforation **1/8 x 3**

From	140	feet to	160	feet
From	180	feet to	200	feet
From	220	feet to	240	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 **240** feet

9. WATER LEVEL
 Static water level **73** 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 **GREAT BASIN DRILLING CO. OF NEVADA, INC.** Contractor
 Address **1220 E MANSE RD** Contractor
PAHRUMP, NV, 89048
 Nevada contractor's license number issued by the State Contractor's Board **47333**
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1462**
 Signed *[Signature]*
 By driller performing actual drilling on-site or contractor
 Date **12/1/2009**

7. 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			

DCNR/DWR RECEIVED
 DEC 1 6 2009

USE ADDITIONAL SHEETS IF NECESSARY

LAS VEGAS OFFICE