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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. 41567

1. OWNER JUAN Romero ADDRESS AT WELL LOCATION _____
MAILING ADDRESS 703 LAST chance Rd #1 APN: Ø32-002-003 Connecticut AVE on APN MAP
EIKO NV. 89801 Delaware AVE on Google
2. LOCATION NE 1/4 SE 1/4 Sec. 12 T. 34 N/S R. 55 E EIKO County _____
PERMIT NO. _____ Parcel No. Block B Lot 3 Subdivision Name LAST CHANCE RANCH 3
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
Aluminum "BFW"		0	48	48
Brown "soft"		48	88	40
Broken "charl"	7'	88	95	7'
Brown chert		95	120	25
Brown Green chert		120	160	40'
NAD-27 GPS 40.845985° N 115.719763° W				

8. WELL CONSTRUCTION
Depth Drilled 160 Feet Depth Cased 160 Feet

HOLE DIAMETER (BIT SIZE)
From 10 Inches To 0 Feet 160 Feet
Inches _____ Feet _____ Feet
Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6		.188	0	160

Perforations:
Type perforation Slots "Factory"
Size perforation 1/8
From 155 feet to 155 feet
From _____ feet to _____ 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 160 feet

9. WATER LEVEL
Static water level 90 feet below land surface
Artesian flow 17 G.P.M. _____ P.S.I.
Water temperature cool °F Quality clear

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name Hard Rock Exploration Contractor
Address 1000 BARRINGTON Ave Contractor
EIKO NV. 89801
Nevada contractor's license number issued by the State Contractor's Board 0048915A
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1670
Signed [Signature]
By driller performing actual drilling on site or contractor
Date 11-3-08

Date started 11-2, 2008
Date completed 11-2, 2008

7. WELL TEST DATA

TEST METHOD: Bailor Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
17	0'	3

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STATE ENGINEERS OFFICE