

PLUGGED BY
WELL LOG
112231

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

OFFICE USE ONLY
Log No. 110679
Permit No. _____
Basin 10B

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. 65544

1. OWNER Campbell Constuction
MAILING ADDRESS 36 Glen Carran Circle

ADDRESS AT WELL LOCATION Mason Valley #108 N13 E25 Bd
Yerington, NV
Subdivision Name: _____ County: Lyon

2. LOCATION SE ¼ NW ¼ Sec 10 T 13N N/S R 25 E
PERMIT/WAIVER No. NEW-84 Parcel No. 001-561-01
Issued by Water Resources

Latitude 390022.00 UTM E NAD 27
Longitude 1191021.37 N NAD 83/WGS 84

3. WORKED PERFORMED
 New Well Replace Recondition
 Deepen Other De-Watering

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
Grayish brown clay		0	5	5
coarse sand	X	5	18	13
Fine to medium gravel	X	18	30	12
<u>NAD-27 GPS</u>				
<u>39.006193° N</u>				
<u>119.171616° W</u>				

9. WELL CONSTRUCTION

Depth Drilled	<u>30</u>	Feet	Depth Cased	<u>30</u>	Feet
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HOLE DIAMETER (BIT SIZE)

	From	To		From	To
<u>12 1/4</u>	Inches	<u>0</u>	Feet	<u>30</u>	Feet
	Inches		Feet		Feet
	Inches		Feet		Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>8</u>		<u>.188</u>	<u>+1</u>	<u>30</u>

Perforations:

Type of perforation	Size of perforation	From	to	feet to	feet
		<u>10</u>		<u>30</u>	<u>feet</u>
					<u>feet</u>

Annular Seal: Yes No

<input type="checkbox"/> Neat Cement	to	<input 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 checked="" type="checkbox"/> ≥30% Bentonite Grout	<u>0</u> to <u>8</u>	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured

Gravel Pack: Yes No 8 to 30 Pumped Poured

Type: _____

Bentonite Chips: Yes No 0 to 8 Pumped Poured

Type: High yield 3/8 bentonite chips

Date started: 23-Mar, 20 10
Date completed: 23-Mar, 20 10

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

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 checked="" type="checkbox"/> Air Lift	<u>50-60</u>		<u>1.0</u>

10. DRILLER'S CERTIFICATION

This well was drilled under my supervision and the report is true to the best of my knowledge.

Name Blain Drilling
Contractor

Address PO Box 1255 CC NV 89702
Contractor

Nevada contractor's license number 46498A
issued by the State Contractor's Board

Nevada driller's license number issued by the 2167
Division of Water Resources, the on-site driller

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

Date 4/1/2010

RECEIVED
200 MAY 14 AM 11:14
STATE ENGINEERS OFFICE

USE ADDITIONAL SHEETS IF NECESSARY

[Signature]
MMH