

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

OFFICE USE ONLY
Log No. 111701
Permit No. 1
Basin 070

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. 66099

1. OWNER Pilot Travel Centers, LLC c/o Property Tax Dept. ADDRESS AT WELL LOCATION Facility ID: 5-000212 MW-31
MAILING ADDRESS P.O. Box 54470 Lexington, KY 40555 5625 W. I-80 Exit 173 Winnemucca, NV

Subdivision Name: _____ County: Humboldt
2. LOCATION SE 1/4 SW 1/4 Sec 3 T 35N N/S R 37 E Latitude 40°55'52.87" UTM E NAD 27
PERMIT/WAIVER No. 013-081-04 Longitude 117°48'19.33" N NAD 83/WGS 84
Issued by Water Resources Parcel No. _____

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 Auger

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Brown sand, semi fine coarse mix		0	10	10
Coarse sands fine sand mix, dark black gray mix		10	25	15
<u>NAD-27 GPS</u>				
<u>40.931449°N</u>				
<u>117.804404°W</u>				
<u>MW# 31</u>				

9. WELL CONSTRUCTION

Depth Drilled	Feet	Depth Cased	Feet
<u>25</u>		<u>25</u>	

HOLE DIAMETER (BIT SIZE)

Inches	From	To
<u>10</u>	<u>0</u>	<u>25</u>

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>4</u>		<u>Sch 40</u>	<u>0</u>	<u>25</u>

Perforations:

Type of perforation _____ Slot _____
Size of perforation _____ .010

From 5 feet to 25 feet
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet

Annular Seal: Yes No

Neat Cement 0 to 3 Pumped Poured
 Cement Grout _____ to _____ Pumped Poured
 Concrete Grout _____ to _____ Pumped Poured
 ≥30% Bentonite Grout _____ to _____ Pumped Poured

Gravel Pack: Yes No 4 to 25 Pumped Poured
Type: #3 Sand

Bentonite Chips: Yes No 3 to 4 Pumped Poured
Type: Bentonite Chips

Date started: 16-Aug , 20 10
Date completed: 19-Aug , 20 10

7. Water Level
Static water level: 17 feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: _____ °F
Quality: _____

8. WELL TEST DATA

TEST METHOD: Bailor Pump Air Lift

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

10. DRILLER'S CERTIFICATION

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

Name Cascade Drilling, L.P.
Contractor
Address 3632 Omec Circle
Contractor
Rancho Cordova, CA 95742

Nevada contractor's license number issued by the State Contractor's Board 73966
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2373

Signed _____
By driller performing actual drilling on site or contractor
Date August 30, 2010