

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

OFFICE USE ONLY
Log No. 113524
Permit No. 79870T
Basin 203

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. 65475

1. OWNER Panaca Farmstead ADDRESS AT WELL LOCATION 901 Panaca Tank Rd
MAILING ADDRESS 76 Atchinson Panaca NV 89042 Subdivision Name: _____ County: _____
2. LOCATION NW 1/4 SW 1/4 Sec 3 T 2 N 68 E Latitude 37° 48.172 UTM E NAD 27
PERMIT/WAIVER No. 79870T Longitude 114° 22.121 N NAD 83/WGS 84

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

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Sand - Clay Top Soil		0	10	10
Black limestone		10	160	150
Limestone - Yellow Green		160	180	20
Black Limestone		180	265	85
Limestone - Red	✓	265	300	35
Black Limestone		300	500	200
Lost circulation Fogon that is seen is cream colored		500	838	338

9. WELL CONSTRUCTION

Depth Drilled 838 Feet Depth Cased 838 Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet
<u>17.5</u>	<u>10</u>	<u>838</u>	Feet
<u>2.4</u>	<u>0</u>	<u>10</u>	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>12.75</u>	<u>41</u>	<u>.313</u>	<u>-2</u>	<u>838</u>

Perforations:

Type of perforation Pre-Perf Factory

Size of perforation 1/8" x 2 1/2" 12' Row

From	feet to	feet
<u>278'</u>	<u>838</u>	feet
_____	_____	feet

Annular Seal: Yes No

Neat Cement to _____ Pumped Poured

Cement Grout to _____ Pumped Poured

Concrete Grout 0 to 100 Pumped Poured

≥30% Bentonite Grout to _____ Pumped Poured

Gravel Pack: Yes No 100 to 838 Pumped Poured

Type: 3/8" - Double washed Gravel

Bentonite Chips: Yes No _____ to _____ Pumped Poured

Type: _____

Date started: 7-29-10, 20 10

Date completed: 11-10-10, 20 10

7. Water Level

Static water level: 219 feet below land surface

Artesian Flow: _____ G.P.M. _____ P.S.I.

Water Temperature: 8.8 °F

Quality: _____

8. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input checked="" type="checkbox"/> Pump <input type="checkbox"/> Air Lift	<u>1,000</u>	<u>21</u>	<u>17</u>
_____	_____	_____	_____
_____	_____	_____	_____

10. DRILLER'S CERTIFICATION

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

Name Anzalone Pumps Inc. Contractor

Address 3632 N. 250 E. Enock, UT 84721 Contractor

Nevada contractor's license number _____

issued by the State Contractor's Board 0073603

Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2406

Signed [Signature]

By driller performing actual drilling on-site or contractor

Date 11-25-10