

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

OFFICE USE ONLY
 Log No. 114543
 Permit No. _____
 Basin 2 162

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. **35479**

1. OWNER **LAWRENCE MOHLMANN** ADDRESS AT WELL LOCATION **1610 E KEENAN WY**
 MAILING ADDRESS **2918 KLAMATH AVE**
SIMI VALLEY, CA 93063

2. LOCATION **SW 1/4 SE 1/4 Sec. 14 T 21 N36°R 53 E NYE** County
 PERMIT NO. **44-742-12** **UNIT 2 MESA OESTE ESTATES**
Issued by Water Resources Parcel No. Subdivision Name

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	Thickness
EXISTING 8" STEEL WELL 0-160'				
CLAY		160	165	5
CALICHIE	WB	165	190	25
CLAY		190	210	20
CALICHIE	WB	210	230	20
CLAY		230	245	15
CALICHIE	WB	245	260	15
WELL LOG #64734				
N36°07'11.7"				
W115°58'55.5"				

**DCNR/DWR
 RECEIVED
 OCT 06 2011**

LAS VEGAS OFFICE

Date started 9/20/2011, 19
 Date completed 9/20/2011, 19

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

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

8. WELL CONSTRUCTION

Depth Drilled 260 Feet Depth Cased 260 Feet

HOLE DIAMETER (BIT SIZE)

EXISTING	Inches	From	To	Feet	Feet
		0	160		
7-7/8	Inches	160	260	Feet	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8	16.94	.188	0	160
4.5	2.37	.248	160	260

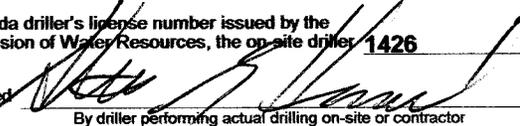
Perforations:
 Type perforation **SCREEN**
 Size perforation **.032**

From 160 feet to 260 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal **EXISTING** Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout

Gravel Packed: Yes No
 From 160 feet to 260 feet

9. WATER LEVEL
 Static water level 118 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 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 **1426**
 Signed 
By driller performing actual drilling on-site or contractor
 Date **9/22/2011**