

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

OFFICE USE ONLY
Log No. 115994
Permit No. _____
Basin 207

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

1. OWNER Steve Groganic ADDRESS AT WELL LOCATION Mile Marker #15
MAILING ADDRESS PO Box 321 Lund NR 318 Lund NV County: White Pine
New 89317 13N
2. LOCATION SE 1/4 NE 1/4 Sec 33 T 13N R 62 E Latitude N 38° 56' 43.47" UTM E NAD 27
PERMIT/WAIVER No. OP-260-05 Longitude W 115° 08' 8.3" 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

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
TOP Soil		0	5	5
3715- Boulders		5	55	50
Reg Gravel		55	165	110
sand boulders		65	180	115
Clay- boulders	X	180	290	110
Hard Rock		290	305	15

9. WELL CONSTRUCTION

Depth Drilled 305 Feet Depth Cased 305 Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet
<u>11</u>	<u>0</u>	<u>305</u>	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 1/2</u>	<u>PUC</u>	<u>Sch 40</u>	<u>0</u>	<u>305</u>

Perforations:

Type of perforation sqw cut
Size of perforation 1 1/8" x 3"

From 150 feet to 305 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 305 Pumped Poured

Bentonite Chips: Yes No to _____ Pumped Poured

Date started: March 14 2012 20
Date completed: 11 20

7. Water Level
Static water level: 170 feet below land surface
Artesian Flow: 5 G.P.M. P.S.I.
Water Temperature: cold °F
Quality: Fair

8. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailor <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	<u>7</u>	<u>7</u>	<u>7</u>

10. DRILLER'S CERTIFICATION

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

Name Davis Drilling and Pumps Contractor
Address HC 61 Box 54 Contractor
Hiko NV 89017
Nevada contractor's license number _____
issued by the State Contractor's Board 8028966
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1121

Signed 10-22-2012
Date Mike Davis