

Lot 16

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

3703
OFFICE USE ONLY
Log No. 117717
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

NOTICE OF INTENT NO. 67918 ✓

1. OWNER Forest Moon Ranch Inc
MAILING ADDRESS 1400 Colorado Street
Boulder City NV 89005

ADDRESS AT WELL LOCATION Sunnyside NV
Subdivision Name: Forest Moon Acres County: NYE

2. LOCATION NE 1/4 SE 1/4 Sec 13 T 6 N R 60 E
PERMIT/WAIVER No. 5 03-802-03

Latitude N38° 22.54' UTM E NAD 27
Longitude W115° 10.615' 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
<u>Sand Boulders</u>	<u>X</u>	<u>0</u>	<u>70</u>	<u>70</u>
<u>Clay gravel</u>	<u>X</u>	<u>70</u>	<u>110</u>	<u>40</u>
<u>Hard Clay</u>		<u>110</u>	<u>118</u>	<u>8</u>
<u>5' of 8" steel casing was grouted after 6" PVC for well head protection</u>				

9. WELL CONSTRUCTION

Depth Drilled	<u>118</u>	Feet	Depth Cased	<u>118</u>	Feet
HOLE DIAMETER (BIT SIZE)					
		From		To	
<u>11</u>	Inches	<u>0</u>	Feet	<u>118</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>6 1/2</u>	<u>PVC</u>	<u>sch 40</u>	<u>0</u>	<u>118</u>

Perforations:

Type of perforation 5 jaw cut
Size of perforation 1/4" x 3"

From 55 feet to 118 feet
From _____ feet to _____ feet

Annular Seal: Yes No

Neat Cement 0 to 50 Pumped Poured
 Cement Grout _____ to _____ Pumped Poured
 Concrete Grout _____ to _____ Pumped Poured
 ≥30% Bentonite Grout _____ to _____ Pumped Poured

Gravel Pack: Yes No 50 to 118 Pumped Poured
Type: 1/4" marls

Bentonite Chips: Yes No _____ to _____ Pumped Poured
Type: _____

Date started: 11-12-2012, 20
Date completed: 11-13-2012, 20

7. Water Level
Static water level: 16 feet below land surface
Artesian Flow: 0 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"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	<u>35</u>		<u>2</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 Hiko NV 89012 Contractor

Nevada contractor's license number issued by the State Contractor's Board: 0028866
Nevada driller's license number issued by the Division of Water Resources, the on-site driller: 1191

Signed: [Signature]
By driller performing actual drilling on-site or contractor
Date: 11-14-2012

(Rev. 05-06)

USE ADDITIONAL SHEETS IF NECESSARY

NAD27 38.375734°N 115.176065°W