

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

OFFICE USE ONLY
Log No. 117736
Permit No. _____
Basin 179

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. 68002

1. OWNER Soldman Tait ADDRESS AT WELL LOCATION 3579 North 151st East St.
MAILING ADDRESS PO Box 160334 EN, NV 89319
EN, NV 89301 Subdivision Name: _____ County: White Pine

2. LOCATION SE 1/4 NE 1/4 Sec 7 T 17 N SR 69 E Latitude N 39° 21.489 UTM E NAD 27
PERMIT/WAIVER No. 010-310-20 Longitude W 114° 48.490 N NAD 83/WGS 84
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
Topsoil		0	2	2
Sand, Gravel		2	30	28
1" Gravel		30	110	80
Clay		110	111	1
Sand, Gravel		111	168	57
Clay		168	170	2

9. WELL CONSTRUCTION

Depth Drilled	Feet	Depth Cased	Feet
<u>170</u>		<u>170</u>	

HOLE DIAMETER (BIT SIZE)

	From	To	
<u>9 7/8</u> Inches	<u>0</u> Feet	<u>170</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>6.625</u>	<u>17.02</u>	<u>.250</u>	<u>18"</u>	<u>30</u>
<u>6.625</u>	<u>5.006</u>	<u>.340</u>	<u>30</u>	<u>170</u>

(SDR-17)

Perforations:

Type of perforation	Size of perforation	From	feet to		feet
<u>Mill</u>	<u>1/8"</u>	<u>90</u>	<u>130</u>		<u>feet</u>
		<u>150</u>	<u>170</u>		<u>feet</u>
					<u>feet</u>
					<u>feet</u>
					<u>feet</u>

Annular Seal: Yes No

Neat Cement to _____ Pumped Poured

Cement Grout to _____ Pumped Poured

Concrete Grout 0 to 50 Pumped Poured

≥30% Bentonite Grout to _____ Pumped Poured

Gravel Pack: Yes No 50 to 170 Pumped Poured

Type: 3/8"

Bentonite Chips: Yes No _____ to _____ Pumped Poured

Type: _____

Date started: March 15, 20 12

Date completed: March 22, 20 12

7. Water Level

Static water level: 30 feet below land surface

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

Water Temperature: _____ °F

Quality: _____

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>50</u>		<u>1 HR</u>

10. DRILLER'S CERTIFICATION

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

Name Gardner Brothers Drilling Contractor

Address PO Box 915 Contractor

Enterprise, UT 84725

Nevada contractor's license number _____

issued by the State Contractor's Board 0068459

Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2458

Signed Clin Gardner By driller performing actual drilling on-site or contractor

Date March 26, 2012