

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

OFFICE USE ONLY
Log No. 118764
Permit No. _____
Basin 117

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

No Log Found
NOTICE OF INTENT NO. 32984
north of dunes, NV

1. OWNER White Mtn. Ranch
MAILING ADDRESS _____

ADDRESS AT WELL LOCATION _____
Subdivision Name: _____ County: Esmeralda

2. LOCATION SE 1/4 NE 1/4 Sec 28 T 2 N R 35 E
PERMIT/WAIVER No. _____

Latitude N 37° 43.30' UTM E NAD 27
Longitude W 118° 05.06' N NAD 83/WGS 84

3. WORKED PERFORMED
 New Well Replace Recondition
 Deepen Other Well Abandoned

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
<i>Worked on to casing it pulled apart at 3 ft.</i>				
<i>Clean out hole to 140' ft. Rust and fill.</i>				
<i>pumped Bentonite Grout Back to 20 ft.</i>				
<i>filled the rest of hole with neat cement.</i>				
<i>dry hole.</i>				

9. WELL CONSTRUCTION

Depth Drilled	<u>140'</u>	Feet	Depth Cased	<u>140'</u>	Feet
HOLE DIAMETER (BIT SIZE)					
	From		To		
<u>12 1/4</u>	Inches	<u>0</u>	Feet	<u>140'</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>14"</u>		<u>12 gauge</u>	<u>0</u>	<u>140'</u>

Perforations:
Type of perforation Torch Cut 1/4 x 4"
Size of perforation 6 Rows 3" Apart
From 0 feet to 60 feet
From _____ feet to _____ feet
From Casing Collapsed at 60' feet to _____ feet
From _____ feet to _____ feet

Annular Seal: Yes No

Neat Cement 0 to 20' Pumped Poured
 Cement Grout _____ to _____ Pumped Poured
 Concrete Grout _____ to _____ Pumped Poured
 Bentonite Grout 20 to 140' Pumped Poured
Gravel Pack: Yes No _____ to _____ Pumped Poured
Type: _____
Bentonite Chips: Yes No _____ to _____ Pumped Poured
Type: _____

Date started: Nov 27, 20 13
Date completed: Nov 28, 20 13

7. Water Level
Static water level: _____ 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 type="checkbox"/> Air Lift			

DCNR/DWR/SNRC RECEIVED
DEC 18 2013

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name Trach Drilling Inc. Contractor
Address PO Box 899 Contractor
Saline Springs, NV 89429
Nevada contractor's license number 31841
issued by the State Contractor's Board
Nevada driller's license number 1740 issued by the Division of Water Resources, the on-site driller
Signed Nathaniel A. Saw
By driller performing actual drilling on-site or contractor
Date Dec 8/13

USE ADDITIONAL SHEETS IF NECESSARY