

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

OFFICE USE ONLY
Log No. 121313
Permit No. _____
Basin No. 108

PRINT OR TYPE IN BLACK INK 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. 71240
WELL NAME (if applicable): BW-81

1. OWNER/CLIENT NAME Atlantic Richfield Company
MAILING ADDRESS 4 Centerpoint Drive
La Palma, CA 90623

DETAILED ADDRESS AT WELL LOCATION 145 N Highway 95 a,
Verington, NV 89447
Subdivision Name: _____ County: Lyon

2. PLS LOCATION SE 1/4 NE 1/4 16 Sec 14 T 25 E
PERMIT/WAIVER NO. 9-2007-0005
Issued by Water Resources Current Parcel No.

Latitude 39.07946122 UTM E NAD 27
Longitude 119.18546744 UTM N NAD 83/WGS 84

3. WORKED PERFORMED
 New Well Deepen: Orig WL# _____
 Replacement: Original well log # _____
 Recondition: Original well log # _____

4. PROPOSED USE
 Domestic Irrigation Monitor
 Mining / Dewater Com / Ind Stock
 Test / Other Mun / QM Rec

5. WELL TYPE
 Auger Rotary RVC
 Air Mud Sonic
 Other

6. LITHOLOGIC LOG

Material Encountered	Lost Circ.	Water Strata	From	To	Thickness
See Attached Sheet!					
RECEIVED 2011 MAR 13 AM 11:43 STATE ENGINEERS OFFICE					
NAD 27 39.079544°N 119.184476°W					

9. WELL CONSTRUCTION
Depth Drilled: 297' Feet Depth Cased: 200' Feet

HOLE DIAMETER (BIT SIZE)

From	To
<u>7"</u> Inches	<u>0</u> Feet
_____ Inches	_____ Feet
_____ Inches	_____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>2"</u>	<u>Udon 40</u>	<u>PVC</u>	<u>0</u>	<u>200'</u>
_____	_____	_____	_____	_____

PERFORATIONS:
Type of perforation: Factory Cut
Size of perforation: 0.20
From 180 Feet To 200' Feet
From _____ Feet To _____ Feet
From _____ Feet To _____ Feet

ANNULAR MATERIALS

<input type="checkbox"/> Sanitary Seal	_____ to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> Neat Cement	_____ to _____	<input checked="" type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input checked="" type="checkbox"/> Cement Grout	<u>0</u> to <u>50</u>	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> Concrete Grout	_____ to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input checked="" type="checkbox"/> Bentonite Chips	<u>170'</u> to <u>177'</u>	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
<input checked="" type="checkbox"/> Bentonite Grout	<u>50'</u> to <u>170'</u>	<input checked="" type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> 15 % <input checked="" type="checkbox"/> 20 % <input type="checkbox"/> Other, explain: _____			
<input checked="" type="checkbox"/> Gravel Pack [> 0.2 in.]	<u>178'</u> to <u>201'</u>	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
<input checked="" type="checkbox"/> Sand Pack [< 0.2 in.]	<u>177'</u> to <u>178'</u>	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
<input checked="" type="checkbox"/> Other, explain:	<u>20'</u> to <u>297'</u>	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured

From 201' to 297' Bentonite chips

Date started: 3-3- _____, 20 11
Date completed: 3-6 _____, 20 11

7. WATER QUALITIES
Static water level: 20 Feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: _____ ° Fahrenheit
Water Quality: _____

8. WELL TEST DATA

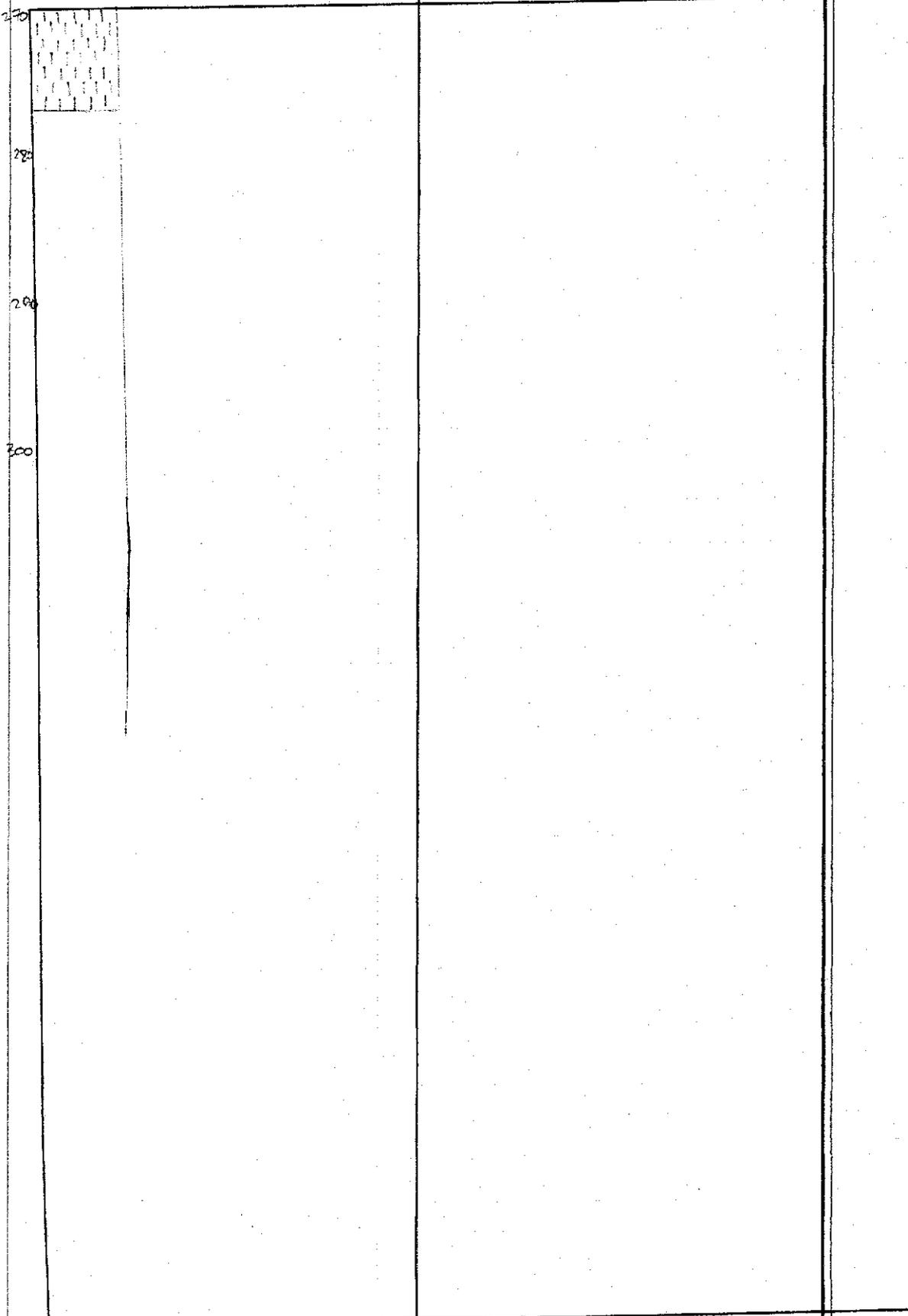
Test Method:	Bailer	Pump	Air Lift
G.P.M.	Draw Down (Feet Below Static)	Recorded Time (Hours)	
_____	_____	_____	_____
_____	_____	_____	_____

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision. This report is true to the best of my knowledge.
Name: Cascade Drilling Co.
Address: 230 E Sydney Drive McCarran, NV

Nevada contractor's license number as issued by the State Contractor's Board: 73966
Nevada well driller's license number as issued by the Nevada Division of Water Resources (on-site driller): 2475 LTD
Signed: [Signature]
Date: 3-6-11

BROWN AND CALDWELL

Date Checked	Checked By	Job Number	By	Date	Calc. No.	Sheet No.
		144230				1 2
Project				Subject		
ADDITIONAL MW INSTALLATION				B/W-81 GENERALIZED LITH LOG		



References/Notes

-  = 15% FINE SAND
-  = 15-40% FINES SL or SC
-  = ≥ 50% FINES CL or ML
-  = ≥ 15% GRAVEL
-  = NO RECOVERY

 = ZONAL SAMPLE DEPTH

S = SULFATE
 A = ALKALINITY
 F = FERROUS IRON
 T = TOTAL IRON
 U = URANIUM, DICK.
 As = ARSENIC, DICK.