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

OFFICE USE ONLY
Log No. 125028
Permit No. 85337T
Basin No. 057

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. 74940
WELL NAME *(If applicable)*:

1. OWNER/CLIENT NAME James Edgemon
MAILING ADDRESS 907 Montmartre Dr.
Modesto, CA 95355

DETAILED ADDRESS AT WELL LOCATION Antelope Valley, NV
*Subdivision Name:* *County:* Lander

2. PLS LOCATION SW ¼ SW ¼ 1 Sec 24 N/S 40 E
PERMIT/WAIVER NO. 85337T
*Issued by Water Resources* *Current Parcel No.*

Latitude 39.9766 UTM E ☐ NAD 27
Longitude -117.43284 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 Flood Reverse

6. LITHOLOGIC LOG

| Material Encountered | Lost Circ | Water Strata | From | To |
|---|---|---|---|---|
| Top Soil | | | 0 | 7 |
| Sand/Gravel | | | 7 | 93 |
| Clay | | | 93 | 101 |
| Red Gravel | | | 101 | 117 |
| Red Gravel/Clay | | | 117 | 193 |
| Clay | | | 193 | 212 |
| Red Gravel/Clay | | X | 212 | 405 |
| Clay | | | 405 | 440 |
| Clay/Gravel | | X | 440 | 562 |
| Green Hard Clay | | | 562 | 573 |
| Clay | | | 573 | 661 |
| Sand Stone | | | 661 | 682 |
| Clay/Sand Stone | | | 682 | 913 |
| Sand Stone/Gravel | | X | 913 | 1115 |
| Clay/Gravel | | X | 1115 | 1160 |

Date started: 18-Apr , 20 16
Date completed: 23-Apr , 20 16

7. *WATER QUALITIES*
*Static water level:* 190 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) |
|---|---|---|
| | | |

9. CONSTRUCTION
Depth Drilled: 1160 Feet Depth Cased 1160 Feet

*HOLE DIAMETER (BIT SIZE)*

| | | From | | To | |
|---|---|---|---|---|---|
| 36 | Inches | +18 | Feet | 50 | Feet |
| 24 | Inches | 50 | Feet | 1160 | Feet |
| | Inches | | Feet | | Feet |

*CASING SCHEDULE*

| Size O.D (Inches) | Weight/Ft. (Pounds) | Wall Thickness (Inches) | From (Feet) | To (Feet) |
|---|---|---|---|---|
| 30 | 79.4 | .250 | 0 | 5 |
| 30 | 39.5 | .109 | 5 | 45 |
| 30 | 79.4 | .250 | 45 | 50 |

*ANNULAR MATERIALS*
Sanitary Seal ☒ Yes ☐ No

| | | | | | |
|---|---|---|---|---|---|
| ☐ Neat Cement | | to | | ☐ Pumped | ☐ Poured |
| ☒ Cement Grout | 0 | to | 50 | ☐ Pumped | ☒ Poured |
| ☐ Concrete Grout | | to | | ☐ Pumped | ☐ Poured |
| ☐ Bentonite Chips | | to | | ☐ Pumped | ☐ Poured |
| ☒ Gravel Pack [ > 0.2 in. ] | 0 | to | 1160 | ☐ Pumped | ☒ Poured |
| ☐ Sand Pack [ < 0.2 in. ] | | to | | ☐ Pumped | ☐ Poured |
| ☐ Other, explain: | | to | | ☐ Pumped | ☐ Poured |

*PERFORATIONS:*
Type of perforation: Mill Cut
Size of perforation: 3/16.

| From | Feet | To | Feet |
|---|---|---|---|
| 206 | Feet | 1160 | Feet |
| | Feet | | Feet |
| | Feet | | Feet |
| | Feet | | Feet |
| | Feet | | Feet |

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision. This report is true to the best of my knowledge.
Name Parsons Drilling, Inc. *Contractor*
Address P.O. Box 1265 Fallon, NV 89407 *Contractor*
Nevada contractor's license number as issued by the *State Contractor's Board.* 29064
Nevada well driller's license number as issued by the *Nevada Division of Water Resources (on-site driller):* 2509
Signed: *By driller performing actual drilling on site or contractor*
Date: 5/5/2016

(Rev. 12-13) USE ADDITIONAL SHEETS IF NECESSARY pg. of pg.

NAD 27: 39.976683°N
117.431899°W

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| 24 | Inches | 50 | Feet | 1160 | Feet |
| | Inches | | Feet | | Feet |

*CASING SCHEDULE*

| Size O.D. (Inches) | Weight/Ft (Pounds) | Well Thickness (Inches) | From (Feet) | To (Feet) |
|---|---|---|---|---|
| 16 | 62.64 | .375 | +2 | 1160 |
| | | | | |
| | | | | |

*ANNULAR MATERIALS*

Sanitary Seal ☒ Yes ☐ No

| | | | | | |
|---|---|---|---|---|---|
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| ☒ Cement Grout | 0 | to | 50 | ☐ Pumped | ☒ Poured |
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| | Feet | | Feet |
| | Feet | | Feet |
| | Feet | | Feet |
| | Feet | | Feet |

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Name Parsons Drilling, Inc. *Contractor*
Address P.O. Box 1265 Fallon, NV 89407 *Contractor*
Nevada contractor's license number as issued by the *State Contractor's Board:* 29064
Nevada well driller's license number as issued by the *Nevada Division of Water Resources (on-site driller)* 2509
Signed *By driller performing actual drilling on site or contractor*
Date: 5/5/2016

*(Rev. 12-13)* **USE ADDITIONAL SHEETS IF NECESSARY** **pg. of pg.**