WHITE—DIVISION OF WATER RESOURCES
CANARY—CLIENT'S COPY
PINK—WELL DRILLER'S COPY

STATE OF NEVADA
DIVISION OF WATER RESOURCES

OFFICE USE ONLY
Log No. 23927
Permit No.
Basin

WELL DRILLERS REPORT

Please complete this form in its entirety

1. OWNER TRUE GEOTHERMAL ENERGY CO. ADDRESS P.O. BOX 2360 CASPER, WY

2. LOCATION NW ¼ & SW ¼ Sec. 10 T. 32 N N/S R. 34 E. PERSHING County
PERMIT NO. SHALLOW TEMPERATURE GRADIENT HOLE

3. TYPE OF WORK
New Well ☒ Recondition ☐
Deepen ☐ Other ☐

4. PROPOSED USE
Domestic ☐ Irrigation ☐ Test ☒
Municipal ☐ Industrial ☐ Stock ☐

5. TYPE WELL
Cable ☐ Rotary ☒
Other ☐

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
GRAVEL, SILT, SAND		0	40	40
CLAY & GRAVEL		40	180	140
CLAY & SAND		180	310	130
CLAY		310	360	50
CLAY & SAND		360	490	130

Date started JUNE 30, 1982
Date completed JULY 2, 1982

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump

BAILER TEST
G.P.M. ..... Draw down ..... feet ..... hours
G.P.M. ..... Draw down ..... feet ..... hours
G.P.M. ..... Draw down ..... feet ..... hours

8. WELL CONSTRUCTION
Diameter hole 6 inches Total depth 500 feet
Casing record 1" DIAMETER PVC
Weight per foot ..... Thickness .....

Diameter	From	To
1 inches	0 feet	500 feet
inches	feet	feet
inches	feet	feet
inches	feet	feet
inches	feet	feet
inches	feet	feet

Surface seal: Yes ☒ No ☐ Type CEMENT
Depth of seal 12-2 feet
Gravel packed: Yes ☐ No ☒
Gravel packed from ..... feet to ..... feet

Perforations:
Type perforation .....
Size perforation .....
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet

9. WATER LEVEL NO WATER ENCOUNTERED
Static water level ..... Feet below land surface .....
Flow ..... G.P.M. .....
Water temperature ..... ° F. Quality .....

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

Name WARNER F. STODDARD
Address P.O. BOX 216 LOVELOCK, NV
Nevada contractor's license number —
Nevada driller's license number 01326
Signed W F Stoddard
Date July 11 - 1982

USE ADDITIONAL SHEETS IF NECESSARY

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