

STATE OF NEVADA
 DIVISION OF WATER RESOURCES

OFFICE USE ONLY
 Log No. 73222
 Permit No. 5457
 Basin 5457
 NOTICE OF INTENT NO. 37702-37704

WELL DRILLER'S REPORT

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

1. OWNER Farr Farms ADDRESS AT WELL LOCATION Antelope Valley
 MAILING ADDRESS HC 61 Box 180
Battle Mountain, NV 89820
 2. LOCATION SW 1/4 SE 1/4 Sec. 13 T 24N N/S R 40E E Lander County
 PERMIT NO. 18946 Issued by Water Resources NA Parcel No. Subdivision Name

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Abandon 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	Thickness
Top Soil		0	11	11
Gravel		11	85	74
Clay & Gravel		85	117	32
Gravel	X	117	160	43
Clay & Gravel		160	168	8
Gravel		168	184	16
Clay & Gravel		184	191	7
Gravel		191	212	21
Clay & Gravel		212	221	9
Gravel		221	258	37
Clay		258	270	12
Gravel		270	277	7
Clay		277	300	23
Gravel		300	315	15
Clay		315	320	5
Gravel		320	335	15
Clay & Rock		335	341	6
Gravel		341	347	6
Clay		347	354	7
Gravel		354	357	3
Clay		357	367	10
Gravel		367	375	8
Gravel		375	410	35
Clay		410	421	11
Gravel		421	434	13
Clay		434	451	17

8. WELL CONSTRUCTION
 Depth Drilled 500 Feet Depth Cased 500 Feet
 HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet	Feet
<u>24</u>	<u>0</u>	<u>100</u>	<u>0</u>	<u>100</u>
<u>17.5</u>	<u>100</u>	<u>375</u>	<u>100</u>	<u>375</u>
<u>15</u>	<u>375</u>	<u>500</u>	<u>375</u>	<u>500</u>

 CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>16</u>	<u>42</u>	<u>.250</u>	<u>0</u>	<u>375</u>
<u>12</u>		<u>.250</u>	<u>375</u>	<u>500</u>

Perforations:
 Type perforation Mill Cut
 Size perforation 1/8
 From 105 feet to 500 feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level 140 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature Cool °F Quality Unknown

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Parsons Drilling, Inc. Contractor
 Address P.O. Box 1265 Contractor
Fallon, NV 89407-1265
 Nevada contractor's license number issued by the State Contractor's Board 29064
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1753
 Signed Douglas N. Parsons
 By driller performing actual drilling on-site or contractor
 Date 5-11-98

7. WELL TEST DATA

TEST METHOD:	Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift <input type="checkbox"/>		
	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)

See also 37702-2

