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

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DO NOT WRITE ON BACK

STATE OF NEVADA
DIVISION OF WATER RESOURCES

WELL DRILLER'S REPORT

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

79164
OFFICE USE ONLY
Log No. ~~77874~~
Permit No.
Basin 60

NOTICE OF INTENT NO. 37215

1. OWNER Beowawe Geo Power
MAILING ADDRESS 9790 Gateway Dr
S-220 Reno NV - 89511

ADDRESS AT WELL LOCATION Beo. Geo. Pw. Plant

2. LOCATION SW ¼ NW ¼ Sec. 17 T. 31 N/S R. 48 E. Eureka County
PERMIT NO. ____ Issued by Water Resources ____ Parcel No. ____ Subdivision Name Beowawe #1 + #2 + SP#3

3. WORK PERFORMED
☐ New Well ☐ Replace ☐ Recondition
☐ Deepen ☒ Abandon ☐ Other

4. PROPOSED USE
☐ Domestic Geo ☐ Irrigation ☐ Test
☐ Municipal/Industrial ☐ Monitor ☐ Stock

5. WELL TYPE
☐ Cable ☐ Rotary ☐ RVC
☐ Air ☐ Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Beowawe #1 Tag Bottom 187' Static 130' Fill to Surface w/ Cement.			5 yds	
Beo. #2 TAG Bottom @ 480' DRY Hole Fill To SURFACE w Cement.			6.5 yds	
SP#3 TAG Bottom @ 550' DRY Hole Fill to Surface w Cement.			4 yds	

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Date started 9-21-98, 19
Date completed 9-23-98, 19

7. WELL TEST DATA
TEST METHOD: ☐ Bailer ☐ Pump ☐ Air Lift

	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)

8. WELL CONSTRUCTION
Depth Drilled ____ Feet Depth Cased ____ Feet

HOLE DIAMETER (BIT SIZE)

	From	To
____ Inches	____ Feet	____ Feet
____ Inches	____ Feet	____ Feet
____ Inches	____ Feet	____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	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

Surface Seal: ☐ Yes ☐ No
Depth of Seal
Placement Method: ☐ Pumped ☐ Poured
Seal Type: ☐ Neat Cement ☐ Cement Grout ☐ Concrete Grout
Gravel Packed: ☐ Yes ☐ No
From ____ feet to ____ feet

9. WATER LEVEL
Static water level DRY feet below land surface
Artesian flow ____ G.P.M. ____ P.S.I.
Water temperature ____ °F Quality

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name AAA Drlg & Equip Rent
Contractor
Address Box 2487 ELKO NV 89803
Contractor

Nevada contractor's license number issued by the State Contractor's Board 20684
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2112
Signed Robby Farrell
By driller performing actual drilling on site or contractor
Date 9-6-98

(Rev. 3-91)

USE ADDITIONAL SHEETS IF NECESSARY

(O)-627