

STATE OF NEVADA
 DIVISION OF WATER RESOURCES

OFFICE USE ONLY
 Log No. 88366 89843
 Permit No. 109
 Basin 109

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

WELL DRILLER'S REPORT

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

NOTICE OF INTENT NO. 50396

OWNER SANTA MARGARITA RANCH ADDRESS AT WELL LOCATION 136 E. Walker Rd.
 MAILING ADDRESS 136 E. Walker Rd. Yerington, NV. 89447

2. LOCATION SE 1/4 SW 1/4 Sec. 31 T 11 N/S R 27 E Lyon County
 PERMIT NO. 49277 Issued by Water Resources 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	Thick-ness
SAND		0	8	8
BROWN WET CLAY		8	15	7
LARGE ROUNDED GRAVEL & SAND		15	40	25
LARGE GRAVEL & BOULDERS		40	80	40
GRAVEL, SAND, BOULDERS		80	130	50
BROWN CLAY		130	290	160
SANDY CLAY		290	300	10
COARSE SAND, FINE GRAVEL		300	400	100
FINE SAND, MED GRAVEL		400	550	150
GREY, GREEN CLAY		550	620	70

100 GPM @ 320'
 GPM @ 550'

PUMPED 18 BAGS OF ABANDONITE MIXED WITH 720 GALLONS OF WATER TO SURFACE
 PUMPED CEMENT 0-10'

plugging of log 88586

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

HOLE DIAMETER (BIT SIZE)
 From _____ To _____
5 1/2 Inches 0 Feet 620 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

Surface Seal: Yes No Seal Type:
 Depth of Seal _____ Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout

Gravel Packed: Yes No
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level _____ 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 Hackworth Drilling, Inc. Contractor
 Address P.O. BOX 850 Contractor
ELKO, NV, 89803
 Nevada contractor's license number issued by the State Contractor's Board 020582
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1654
 Signed [Signature]
 By driller performing actual drilling on-site or contractor
 Date 05-30-02

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

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

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 02 JUN 26 AM 09:49
 CIVIL ENGINEERS OFFICE