

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

471174  
 OFFICE USE ONLY

Log No. \_\_\_\_\_  
 Permit No. **72823**  
 Basin **045**

- mmh  
 6/11/10

PRINT OR TYPE 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. **55090**

1. OWNER **JOHN GOURLEY / SMILEY BEEF LLC**  
 MAILING ADDRESS **P. O. BOX 1151**  
**LAMOILLE, NV 89828**

ADDRESS AT WELL LOCATION **RUBY HOME RANCH DRIVE**

2. LOCATION **SE 1/4 SW 1/4 Sec. 13 T 33N**  
 PERMIT NO. **NE 72823** Issued by Water Resources  
 Parcel No. **006-520-051**

N/S R **57E** E **ELKO** County  
**A PARCEL OF LAND FROM THE RUBY HOME RANCH**  
 Subdivision Name

since 12/15/08 POC

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

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

5. WELL TYPE  
 Cable  Rotary  RVC  
 Air  Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
TOPSOIL		0	9	9
GRAVEL & ROCK, BROWN		9	16	7
BROWN CLAY		16	18	2
SILTSTONE, LT BROWN		18	23	5
SILTSTONE, BROWN		23	35	12
BROWN CLAY		35	45	10
GRAVEL & ROCK, BROWN		45	55	10
SAND & GRAVEL, WHITE	XX	55	70	15
SILTSTONE, LT BROWN		70		
W/GRAVEL			105	35
SANDSTONE W/GRAVEL MIX	XXX	105	217	112

8. WELL CONSTRUCTION

Depth Drilled **290** **217** Feet Depth Cased **217** Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet
<b>12 3/4</b>	0	<b>220</b>	Feet
			Feet
			Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<b>8 5/8</b>	<b>16.94</b>	<b>.188</b>	<b>+1</b>	<b>217</b>

Perforations:  
 Type perforation **1-MILL SLOT & 1-TORCH CUT**  
 Size perforation **3/16 x 3, 8 ROW**

From	To	Feet
<b>177</b>		<b>217</b>
		feet

Surface Seal:  Yes  No Seal Type:  
 Depth of Seal **100**  Neat Cement  
 Placement Method:  Pumped  Concrete Grout  
 Poured

Gravel Packed:  Yes  No  
 From **100** feet to **217** feet

\* See Dom well log for property - #

Date started **6/2/2005** 19\_\_  
 Date completed **6/7/2005** 19\_\_

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

7. WELL TEST DATA

TEST METHOD:  Bailer  Pump  Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<b>70'</b>	<b>45</b>	<b>30 MIN</b>
<b>215'</b>	<b>300</b>	<b>4.5 HRS</b>

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 **1998**  
 Signed **Bradley D. Wiese**  
 By driller performing actual drilling on-site or contractor  
 Date **6/21/2005**

mmh (F)