

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



OFFICE USE ONLY
 Log No. 101615

Permit No. _____
 Basin 044

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. **57580**

1. OWNER **JOHN GOURLEY**
 MAILING ADDRESS **P. O. BOX 281151**
LAMOILLE, NV 89828

ADDRESS AT WELL LOCATION **STAGELINE LOOP PARCEL 4A**
 GPS - 11T 0595692 4538489 WGS-84

2. LOCATION **NW 1/4 SE 1/4 Sec. 23 T 36N**
 PERMIT NO. **005-53A-006**
 Issued by Water Resources Parcel No.

N/S R **54E E ELKO** County
WILD HORSE LAND COMPANY 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
TOP SOIL		0	3	3
SAND & GRAVEL		3	20	17
TAN CLAY		20	35	15
COARSE GRAVEL		35	50	15
GRAVEL-MEDIUM TO FINE		50	140	90
GRAVEL (MEDIUM TO FINE W/FINE GRAY SANDSTONE)		140	180	40
SANDSTONE MED. FINE		180	190	10
W/SOME GRAVEL		190	220	30
FINE GRAVEL		190	220	30
SOFT SANDSTONE & FINE GRAVEL	XXX	220	300	80

SEAL: PLACED 22 BAGS OF 3/8" MEDIUM CHIP BENTONITE FROM 50' TO 10' AND NEAT CEMENT FROM 10' TO THE SURFACE.

40.992068 ° N
115.861418 ° W
NAD83 Con US

8. WELL CONSTRUCTION

Depth Drilled **300** Feet Depth Cased **300** Feet
 HOLE DIAMETER (BIT SIZE)
10 5/8 Inches From **0** Feet To **300** Feet
 Inches Feet Feet Feet
 Inches Feet Feet Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6-5/8	13	.188	0	300
6-5/8	17.2	.250	+2	0

Perforations:
 Type perforation **SLOTS**
 Size perforation **3/16X3 6 ROW**
 From **240** feet to **300** feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal **50** Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From **50** feet to **300** feet

9. WATER LEVEL
 Static water level **132** feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature **COLD** °F Quality **GOOD**

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 **1166**
 Signed Dale C. Veden
 By driller performing actual drilling on-site or contractor
 Date **8/11/2006**

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
10	301110	2.15

STATE ENGINEERS OFFICE
 2006 OCT 11 AM 11:41
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