

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

OFFICE USE ONLY  
 Log No. 101619  
 Permit No. \_\_\_\_\_  
 Basin 048

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. **57582**

1. OWNER **ED MULLIN** ADDRESS AT WELL LOCATION **1026 MEADOW VIEW DRIVE,**  
 MAILING ADDRESS **P. O. BOX 8295** (UTM 11T 0603610 4505030) **WGS-84**  
**SPRING CREEK, NV 89815**

2. LOCATION **SW** 1/4 **NW** 1/4 Sec. **03** T **32N** N/S R **55E** E **ELKO** County  
 PERMIT NO. **077-010-006** **WESTERN HILLS** Subdivision Name  
 Issued by Water Resources Parcel No.

3. WORK PERFORMED  New Well  Replace  Recondition  Domestic  Irrigation  Test  Cable  Rotary  RVC  
 Deepen  Abandon  Other  Municipal/Industrial  Monitor  Stock  Air  Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
TOP SOIL		0	5	5
CLAY		5	10	5
CLAY & FINE GRAVEL		10	30	20
GRAVEL & CLAY		30	90	60
CLAY & FINE GRAVEL		90	100	10
RED CLAY		100	110	10
RED CLAY & ROCK	X	110	140	30
FINE GRAVEL	X	140	160	20
GRAVEL		160	180	20
RED SHALE		180	190	10
FINE GRAVEL	XXX	190	220	30

8. WELL CONSTRUCTION  
 Depth Drilled **220** Feet Depth Cased **220** Feet  
 HOLE DIAMETER (BIT SIZE)  
**10-5/8** Inches From **0** Feet To **220** Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<b>6-5/8</b>	<b>13</b>	<b>.188</b>	<b>+2</b>	<b>220</b>

Perforations:  
 Type perforation **MACHINE MILL SLOT**  
 Size perforation **3/16x3 6-ROW**  
 From **200** feet to **220** feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  Neat Cement  
 Depth of Seal **100**  Cement Grout  
 Placement Method:  Pumped  Concrete Grout  
 Poured  
 Gravel Packed:  Yes  No  
 From **220** feet to **100** feet

9. WATER LEVEL  
 Static water level **59** feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature **COLD** °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 **1408**  
 Signed *[Signature]*  
 By driller performing actual drilling on-site or contractor  
 Date **8/22/2006**

Date started **8/18/2006**, 19\_\_\_\_  
 Date completed **8/21/2006**, 19\_\_\_\_

7. WELL TEST DATA  
 TEST METHOD:  Bailer  Pump  Air Lift  
 G.P.M. Draw Down (Feet Below Static) Time (Hours)  
**10** **3**

40.689750 °N  
 115.772876 °W  
 NAD83 Con US

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