

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. 57850

1. OWNER Eureka County ADDRESS AT WELL LOCATION Eureka County
 MAILING ADDRESS 701 South Main Landfill GPS Box 39,521613
Eureka, Nevada 89316 WGS 84 Datum -115.956904
 2. LOCATION NE 1/4 NW 1/4 Sec. 13 T. 19 N 53 E Eureka County
 PERMIT NO. SW07091601 008-070-10 Subdivision Name _____
Issued by Water Resources Parcel No.

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 HSA

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
<u>Silty Sand w/ small gravels</u>	<u>-</u>	<u>0</u>	<u>5</u>	<u>5</u>
<u>Bedrock, decomposed</u>	<u>-</u>	<u>5</u>	<u>20</u>	<u>15</u>
<u>N 39.521691</u>				
<u>W 115.956006 NADA7</u>				

8. WELL CONSTRUCTION
 Depth Drilled 20' Feet Depth Cased 20' Feet
 HOLE DIAMETER (BIT SIZE)
 From 8' Inches To 20' Feet
 _____ 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)
<u>1"</u>		<u>sch 40</u>	<u>13</u>	<u>5</u>

 Perforations:
 Type perforation Factory Slot
 Size perforation .120
 From 8.5 feet to 20 feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type:
 Depth of Seal 5' Neat Cement
 Placement Method: Pumped Concrete Grout
 Poured
 Gravel Packed: Yes No
 From 5 feet to 20 feet

Date started 7-26-06, 2006
 Date completed 7-26-06, 2006

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift			

STATE ENGINEERS
150-1111
2007 JAN 19 6 11 AM '07
RECEIVED

9. WATER LEVEL
 Static water level AAA 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 Harz-Town Drilling Contractor
 Address P.O. Box 940 Meridian ID 83680 Contractor
 Nevada contractor's license number issued by the State Contractor's Board 0038018
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller M-2137
 Signed [Signature] By driller performing actual drilling on site or contractor
 Date 1-15-07