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

OFFICE USE ONLY
Log No. 103783
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. 58921

1. OWNER Pete Devita
MAILING ADDRESS 795 Mt City Highway
Elko, NV 89801

ADDRESS AT WELL LOCATION 20 miles North of Elko on Mountain City H Highway
Subdivision Name: County: Elko

2. LOCATION NE ¼ NE ¼ Sec 3 T 37N N/S R 54 E
PERMIT/WAIVER No. 005 540 005
Issued by Water Resources Parcel No.

Latitude 41.13288N
Longitude 115.87792W
UTM E N
☐ NAD 27 ☒ NAD 83/WGS 84

3. WORKED PERFORMED
☒ New Well ☐ Replace ☐ Recondition ☐ Deepen ☐ 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	Thickness
Sub Soil		0	3	3
Clay		3	46	43
Rock		46	47	1
Sandstone		47	138	91
Broken Sandstone	X	138	150	12

N 41.132978
W 115.877003 NAD27

Date started: 7-Jan, 20 07
Date completed: 9-Jan, 20 07

9. WELL CONSTRUCTION
Depth Drilled 150 Feet Depth Cased 150 Feet

HOLE DIAMETER (BIT SIZE)

		From		To	
10	Inches	0	Feet	150	Feet
	Inches		Feet		Feet
	Inches		Feet		Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6	12.92	188	+1	10
6	PVC	SDR-17	10	150

Perforations:
Type of perforation Screen
Size of perforation 0.032
From 130 feet to 150 feet
From feet to feet
From feet to feet
From feet to feet
From feet to feet

Annular Seal: ☒ Yes ☐ No
☐ Neat Cement to ☐ Pumped ☐ Poured
☐ Cement Grout to ☐ Pumped ☐ Poured
☒ Concrete Grout 0 to 10 ☐ Pumped ☒ Poured
☒ ≥30% Bentonite Grout 10 to 51 ☒ Pumped ☐ Poured
Gravel Pack: ☒ Yes ☐ No 51 to 150 ☐ Pumped ☐ Poured
Type: 3/8 PEA GRAVE;
Bentonite Chips: ☐ Yes ☐ No to ☐ Pumped ☐ Poured
Type:

7. Water Level
Static water level: 16 feet below land surface
Artesian Flow: G.P.M. P.S.I.
Water Temperature: cold °F
Quality:

8. WELL TEST DATA
TEST METHOD: ☐ Bailer ☐ Pump ☐ Air Lift

	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
APPROX	30		

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name SHAREL C. FERTIG SR. dba FERTIG DRILLING COMPANY (Contractor)
Address P.O. BOX 525 (Contractor)
ELKO, NV 89803
Nevada contractor's license number issued by the *State Contractor's Board* 031904
Nevada driller's license number issued by the Division of Water Resources, the *on-site driller* 1584
Signed (By driller performing actual drilling on site or contractor)
Date 1-23-07 18-Jan-07

(Rev. 05-06)

USE ADDITIONAL SHEETS IF NECESSARY