

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

OFFICE USE ONLY

Log No. 104062

Permit No. _____

Basin STP 049



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. 59037

1. OWNER GERRY MOLYNEAUX
MAILING ADDRESS P. O. BOX 1188
ELKO, NV 89803

ADDRESS AT WELL LOCATION 1734 CUTHBERSON ROAD

Subdivision Name: PARCEL OF LAND County: ELKO

2. LOCATION SE 1/4 SE 1/4 Sec 7 T 34N N/S R 55 E
PERMIT/WAIVER No. 006-09B-061
Issued by Water Resources Parcel No.

Latitude UTM E 11T0599833 NAD 27
Longitude N 4521755 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	Thick-ness
TOPSOIL		0	3	3
BROWN CLAY		3	8	5
BOULDERS & GRAVEL		8	40	32
SILTSTONE	420	40	460	420
SILTSTONE & GRAVEL MIX	450			
<u>N 40, 840856</u>				
<u>W 16, 841893 NAD27</u>				

9. WELL CONSTRUCTION				
Depth Drilled	Feet	Depth Cased	Feet	
460		460		
HOLE DIAMETER (BIT SIZE)				
	From	To		
10 5/8	Inches	0	Feet	460
	Inches		Feet	
	Inches		Feet	

CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	13	.188	+1	460

Perforations:				
Type of perforation	MACHINED MILL SLOT			
Size of perforation	3/16" X 3", 6 ROW			
From	440	feet to	460	feet
From		feet to		feet
From		feet to		feet
From		feet to		feet

Annular Seal: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
<input checked="" type="checkbox"/> Neat Cement	5	to	15	<input type="checkbox"/> Pumped <input checked="" type="checkbox"/> Poured
<input type="checkbox"/> Cement Grout		to		<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
<input type="checkbox"/> Concrete Grout		to		<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
<input type="checkbox"/> ≥30% Bentonite Grout		to		<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
Gravel Pack: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	50	to	460	<input type="checkbox"/> Pumped <input checked="" type="checkbox"/> Poured
Type:	3/8" PEA GRAVEL			
Bentonite Chips: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	15	to	50	<input type="checkbox"/> Pumped <input checked="" type="checkbox"/> Poured
Type:	3/8" CHIPS			

Date started: 28-Feb, 2007
Date completed: 3-Mar, 2007

7. Water Level
Static water level: 275 feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: COLD °F
Quality: _____

8. WELL TEST DATA			
TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	20		15

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 1689
Signed [Signature]
By driller performing actual drilling on site or contractor
Date 3/8/2007