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

OFFICE USE ONLY
Log No. 104681
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. 61891

1. OWNER KATHERINE CHURCHFIELD
MAILING ADDRESS 502 OSINO UNIT 9
ELKO, NV 89801

ADDRESS AT WELL LOCATION 8239 HORSEHAVEN, RYNDON
Subdivision Name: Twin River Ranchos #4 *County:* ELKO

2. LOCATION NE ¼ NW ¼ Sec 5 T 35N N/S R 57 E
PERMIT/WAIVER No. 026-003-005
Issued by Water Resources Parcel No.

Latitude 40.954722
Longitude 115.577645
UTM E 11T 0619709 ☒ NAD 27
N 4534493 ☐ 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
TOPSOIL		0	2	2
CLAY		2	115	113
CLAY w/SOME GRAVEL		115	155	40
GRAVEL	155-180	155	180	25

Date started: 22-Oct , 20 07
Date completed: 22-Oct , 20 07

9. *WELL CONSTRUCTION*
Depth Drilled 180 Feet Depth Cased 180 Feet

HOLE DIAMETER (BIT SIZE)

		From		To	
10 5/8	Inches	0	Feet	180	Feet
	Inches		Feet		Feet
	Inches		Feet		Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6.625	13	.188	+1.5	180

Perforations:
Type of perforation MACHINED MILL SLOT
Size of perforation 3/16" X 3", 6 ROW
From 240 feet to 260 feet
From feet to feet
From feet to feet
From feet to feet
From feet to feet

Annular Seal: ☒ Yes ☐ No
☒ Neat Cement 5 to 15 ☐ Pumped ☒ Poured
☐ Cement Grout to ☐ Pumped ☐ Poured
☐ Concrete Grout to ☐ Pumped ☐ Poured
☐ ≥30% Bentonite Grout to ☐ Pumped ☐ Poured

Gravel Pack: ☒ Yes ☐ No 50 to 180 ☐ Pumped ☒ Poured
Type: 3/8" PEA GRAVEL
Bentonite Chips: ☒ Yes ☐ No 15 to 50 ☐ Pumped ☒ Poured
Type: 3/8" BENTONITE CHIPS

7. *Water Level*
Static water level: 72 feet below land surface
Artesian Flow: G.P.M. P.S.I.
Water Temperature: COOL °F
Quality: GOOD

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

	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
AIR LIFT	50		1

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* 2335
Signed David R Solan (By driller performing actual drilling on site or contractor)
Date 10/29/2007

STATE ENGINEER'S OFFICE
2007 NOV -5 AM 11:36
RECEIVED

(Rev. 05-06)

USE ADDITIONAL SHEETS IF NECESSARY