STATE OF NEVADA
DIVISION OF WATER RESOURCES

WELL DRILLER'S REPORT

OFFICE USE ONLY
Log No. 105937
Permit No.
Basin 037

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. 61908

1. OWNER SCOTT McKAY
MAILING ADDRESS P. O. BOX 96
MOUNTAIN CITY, NV 89831

ADDRESS AT WELL LOCATION 438 DIAMOND AVE
BLK A, LOT 6
Subdivision Name: WILDHORSE ESTATES County: ELKO

2. LOCATION NW ¼ SW ¼ Sec 8 T 43N N/S R 55 E
PERMIT/WAIVER No. 073-001-006
Issued by Water Resources Parcel No.

Latitude 41.635721
Longitude 115.810612
UTM E 11T 0599049 N 4609802
☒ 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
TOPSOIL		0	3	3
BROWN CLAY		3	8	5
SILTSTONE		8	60	52
BROWN QUARTZ	105	60	360	300
	160			
	340			

Date started: 26-Nov, 20 07
Date completed: 29-Nov, 20 07

9. WELL CONSTRUCTION
Depth Drilled 360 Feet Depth Cased 360 Feet

HOLE DIAMETER (BIT SIZE)

		From		To	
10 5/8	Inches	0	Feet	360	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	360

Perforations:
Type of perforation MACHINE MILL SLOT
Size of perforation 3/16" X 3", 6 ROW

From	100	feet to	105	feet
From	185	feet to	200	feet
From	340	feet to	360	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 360 ☐ 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: 55 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)
20		8

2008 NOV -4 PM 1:30

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 (By driller performing actual drilling on site or contractor)
Date 11/30/2007

(Rev. 05-06)

USE ADDITIONAL SHEETS IF NECESSARY