STATE OF NEVADA

DIVISION OF WATER RESOURCES

WELL DRILLER'S REPORT

OFFICE USE ONLY
Log No. 107013
Permit No.
Basin 153

PRINT OR TYPE ONLY

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. **62343**

1. OWNER **Larry Wiseheart**
MAILING ADDRESS **P.O. 249**
Eureka, NV 89316

ADDRESS AT WELL LOCATION **Diamond Valley**
Eureka, NV 89316
Subdivision Name: *County:* **Eureka**

2. LOCATION **NE¼NW¼** Sec **20** T **21N** N/S R **54E**
PERMIT/WAIVER NO. **CER9672** / Per 33671
Issued by Water Resources Parcel. No.

Latitude **39.67654N** UTM E ☐ NAD 27
Longitude **115.92200** N ☒ NAD 83/WGS 84

3. WORK 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
Black Sand w/Gravel	X	260	286	26
Black & tan Gravel	X	286	460	174
Gravel w/gray streaks clay	X	460	500	40

N 39.676612
W 115.92200 NAD27

Date started: **8/19**, 20 **08**
Date completed: **8/23**, 20 **08**

7. *Water Level*
Static water level: **162** feet below land surface
Artesian Flow: G.P.M. P.S.I
Water Temperature: **cool** °F
Quality: **unknown**

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

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
To be	**Tested at**	**a later date**

9. *WELL CONSTRUCTION*
Depth Drilled **500** Feet Depth Cased **500** Feet

HOLE DIAMETER (BIT SIZE)

	From	To
14 3/4 Inches	**260** Feet	**500** Feet
Inches	Feet	Feet
Inches	Feet	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
12	**33.4**	**.250**	**230**	**500**

Perforations:
Type of perforation **Mill Cut**
Size of perforation **3" X 1/8" Double Row**
From **230** feet to **500** 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 to ☐ Pumped ☐ Poured
☐ ≥30% Bentonite Grout to ☐ Pumped ☐ Poured
Gravel Pack: ☐ Yes ☒ No to ☐ Pumped ☐ Poured
Type:
Bentonite Chips: ☐ Yes ☒ No to ☐ Pumped ☐ Poured
Type:

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name **Parsons Drilling, Inc** (CONTRACTOR)
Address **P.O. Box 1265** (CONTRACTOR)
Fallon, NV 89407-1265
Nevada contractor's license number issued by the *State Contractor's Board* **29064**
Nevada driller's license number issued by the Division of Water Resources, the *on-site driller* **2285**
Signed Gabe King
By driller performing actual drilling on site or contractor
Date **9/17/08**

2008 SEP 24 AM 11:13

(Rev 05-06) USE ADDITIONAL SHEETS IF NECESSARY

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