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

OFFICE USE ONLY
Log No. 107129
Permit No.
Basin 190

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. 62212

1. OWNER RANDY MICHAEL
MAILING ADDRESS 137 GOLTZ AVE
SALT LAKE CITY, UT 84101-3125

ADDRESS AT WELL LOCATION SR 233 @ THE UTAH STATE LINE
NORTH SIDE OF THE HIGHWAY
Subdivision Name: GAMBLE DISTRICT *County:* ELKO

2. LOCATION NE ¼ NE ¼ Sec 9 T 40N N/S R 70 E
PERMIT/WAIVER No. 010-81B-002
Issued by Water Resources Parcel No.

Latitude [redacted]
Longitude [redacted]
UTM E 11T 0747284 [redacted] NAD 27
N 4584025 ☐ 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	1	1
SAND		1	15	14
SAND/CLAY MIX		15	55	40
GREY CLAY		55	70	15
GRAVEL		70	100	30
BROWN CLAY		100	150	50
GREY SHALE W/ CLAY MIX		150	200	50
THIS WAS A DRY HOLE NO				
WATER WAS ENCOUNTERED				
HOLE WAS BACKFILLED WITH				
DRILL CUTTINGS				
0-10' CEMENT PLUG POURED				

Date started: 15-Jul , 20 08
Date completed: 16-Jul , 20 08

9. *WELL CONSTRUCTION*
Depth Drilled 200 Feet Depth Cased 200 Feet

HOLE DIAMETER (BIT SIZE)

		From		To	
10 5/8	Inches	0	Feet	200	Feet
	Inches		Feet		Feet
	Inches		Feet		Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
		NO CASING INSTALLED		

Perforations:
Type of perforation NO CASING INSTALLED
Size of perforation
From feet to 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:

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

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

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
0		1.5

STATE ENGINEERS OFFICE
2008 JUL 25 AM 11:20
RECEIVED

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* 1653
Signed [signature]
by driller performing actual drilling on site or contractor
Date 7/22/2008

(Rev. 05-08)

USE ADDITIONAL SHEETS IF NECESSARY