

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

OFFICE USE ONLY **109884**

Log No. _____
Permit No. _____
Basin **107**

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. **63657**

1. OWNER **Jeff Hunewill** ADDRESS AT WELL LOCATION **Smith Valley**
MAILING ADDRESS **195 Hunewill Lane**
Wellington, Nevada 89444 Subdivision Name: _____ County: **Lyon**

2. LOCATION SE ¼ NE ¼ Sec 2 T 11N N/S R 23 E Latitude **38°50.744' N** UTM E NAD 27
Longitude **119°21.985' W** NAD 83/WGS 84
PERMIT/WAIVER No. **24815/R662** Issued by Water Resources Parcel No. _____

3. WORKED PERFORMED New Well Replace Recondition Deepen Other
4. PROPOSED USE Domestic Municipal/Industrial Irrigation Monitor Test Stock
5. WELL TYPE RVC Cable Rotary Air Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
sand		0	12	12
clay		12	15	3
sand		15	180	165
clay		180	223	43
sand and clay layerd		223	360	137
clay		360	400	40
sand and clay layerd		400	570	170
clay		570	590	20

38.845821°N
119.365423°W
NAD 27 (F2)

Reconditioning of well log # 10760

9. WELL CONSTRUCTION

Depth Drilled	Feet	Depth Cased	Feet
590		580	

HOLE DIAMETER (BIT SIZE)

From	To	Feet	Feet
24	30	590	
36	0	30	

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
30		.25	0	30
16		.250	+2	580

Perforations:

Type of perforation	Size of perforation	From	feet to	To	feet
mill slot	90X3	110	170 QR		
		220	240 QR		
		240	360 DR		
		400	580 DR		

Annular Seal: Yes No

Material	to	Material	to
<input type="checkbox"/> Neat Cement	0 to 100	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input checked="" type="checkbox"/> Cement Grout	0 to 100	<input checked="" type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> Concrete Grout		<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> ≥30% Bentonite Grout		<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured

Gravel Pack: Yes No **100 to 590** Pumped Poured
Type: **1/8 X 1/4 Gopher rock**

Bentonite Chips: Yes No Pumped Poured
Type: _____

Date started: **17-Feb**, 20 **09**
Date completed: **2/22/2009**, 20 **09**

7. Water Level
Static water level: **38** feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: **cool** °F
Quality: **good**

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	800		2 hr
	93		

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name **Hydro Resources Nevada, Inc. dba Humboldt Drilling & Pump**
Contractor
Address **4975 W. Winnemucca Blvd.**
Contractor
Winnemucca, Nevada 89445
Nevada contractor's license number **56797**
issued by the State Contractor's Board
Nevada driller's license number issued by the **1713**
Division of Water Resources, the on-site driller
Signed **J. Tomphins - Driller**
By driller performing actual drilling on site or contractor
Date **3/16/2009**