

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

OFFICE USE ONLY
Log No. 110011
Permit No. _____
Basin 649

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. 64856

1. OWNER REFUGIO QUINTERO ADDRESS AT WELL LOCATION ROCKLAND DRIVE
MAILING ADDRESS 2089 COLONIAL DRIVE
ELKO, NEVADA 89801-8448 Subdivision Name: SPECIAL LANDS County: ELKO

2. LOCATION SW ¼ NE ¼ Sec 7 T 34N N/S R 55 E Latitude 40.848062° N UTM E 11T 0599461 NAD 27
PERMIT/WAIVER No. 006-09B-075 Longitude 115.8261190° W N 4522349 NAD 83/WGS 84
Parcel No. NAD 27 60

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	Thick-ness
PEABLE CONGLOMERATE		0	150	150
VOLCANIC TUFT		150	240	90
TUFT & MED BRN SANDSTONE		240	270	30
TUFT		270	375	105
DARK GRAY SANDSTONE		375	580	205
1st water @ 540'				
2nd water @ 565'				

9. WELL CONSTRUCTION

Depth Drilled	580	Feet	Depth Cased	580	Feet
HOLE DIAMETER (BIT SIZE)					
		From		To	
10 5/8	Inches	0	Feet	580	Feet
	Inches		Feet		Feet
	Inches		Feet		Feet
CASING SCHEDULE					
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)	
6 5/8	13	.188	+2	580	

Perforations:
Type of perforation MACHINED MILL SLOT
Size of perforation 3/16" X 3", 6 ROWS

From <u>560</u>	feet to <u>580</u>	feet
From _____	feet to _____	feet
From _____	feet to _____	feet
From _____	feet to _____	feet
From _____	feet to _____	feet

Annular Seal: Yes No

<input checked="" type="checkbox"/> Neat Cement	1 to 15	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
<input type="checkbox"/> Cement Grout	_____ to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> Concrete Grout	_____ to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> ≥30% Bentonite Grout	_____ to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured

Gravel Pack: Yes No 50 to 580 Pumped Poured
Type: 3/8" WASHED PEA GRAVEL

Bentonite Chips: Yes No 15 to 50 Pumped Poured
Type: 3/8" BENTONITE CHIPS

Date started: 28-Dec , 20 09
Date completed: 31-Dec , 20 09

7. Water Level
Static water level: 306 feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: 62 °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			
125 PSI @ 825 CFM	20		3

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 1166

Signed [Signature]
By driller performing actual drilling on site or contractor

Date 12/31/2009