

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

OFFICE USE ONLY  
Log No. 110598  
Permit No. \_\_\_\_\_  
Basin 676

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. 64378

1. OWNER Pilot Travel Centers LLC  
MAILING ADDRESS 5505 Lenox Rd  
Knoxville, TN 37909  
2. LOCATION NE 1/4 NE 1/4 Sec 10 T 35 R 37 E  
PERMIT/WAIVER No. FACE 5-000-212 013-081-04  
Issued by Water Resources Parcel No. \_\_\_\_\_

ADDRESS AT WELL LOCATION 5625 West I-80  
Winnemucca, NV 89415  
Subdivision Name: \_\_\_\_\_ County: Humboldt  
Latitude N 40.93033° UTM E  NAD 27  
Longitude W 117.80632° N  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  AUGER

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
well materials		0	25	
overdrill				
2" 4"	14			
MW-13				

9. WELL CONSTRUCTION

Depth Drilled	Feet	Depth Cased	Feet
25		25	

HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet	Feet
12	0	25		

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
4		SCH. 40	0	10

Perforations:  
Type of perforation Factory slot  
Size of perforation .020  
From 10 feet to 25 feet  
From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Annular Seal:  Yes  No

Neat Cement to \_\_\_\_\_  Pumped  Poured  
 Cement Grout 0 to 6  Pumped  Poured  
 Concrete Grout to \_\_\_\_\_  Pumped  Poured  
 ≥30% Bentonite Grout to \_\_\_\_\_  Pumped  Poured

Gravel Pack:  Yes  No 8 to 25  Pumped  Poured  
Type: 10/20 Silica Sand

Bentonite Chips:  Yes  No 0 to 8  Pumped  Poured  
Type: 3/8 Bentonite Chips

7. Water Level  
Static water level: 14 feet below land surface  
Artesian Flow: No G.P.M. \_\_\_\_\_ P.S.I. \_\_\_\_\_  
Water Temperature: 28.5 °F  
Quality: \_\_\_\_\_

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 type="checkbox"/> Air Lift			

10. DRILLER'S CERTIFICATION  
This well was drilled under my supervision and the report is true to the best of my knowledge.  
Name Haz-Tech Drilling, Inc Contractor  
Address P.O. Box 940 Contractor  
Meridian, Id 83680  
Nevada contractor's license number \_\_\_\_\_  
issued by the State Contractor's Board 0038018  
Nevada driller's license number issued by the Division of Water Resources, the on-site driller M-18037-1  
Signed David J. Gargale  
By driller performing actual drilling on site or contractor  
Date 4/25/10