

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

OFFICE USE ONLY
Log No. 115345
Permit No. _____
Basin 048

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. 67592

1. OWNER BAILEY & ASSOCIATES
MAILING ADDRESS 1250 LAMOILLE HWY STE 625
ELKO, NV 89801
ADDRESS AT WELL LOCATION 703 HOLYOKE DR
Subdivision Name: SPECIAL LANDS County: ELKO

2. LOCATION SE 1/4 SW 1/4 Sec 9 T 33N N/S R 57 E
Latitude UTM E 11T 0621841 NAD 27
Longitude N 4511966 NAD 83/WGS 84
Issued by Water Resources Parcel No. 006-52F-020

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
TOP SOIL		0	2	2
TAN CLAY		2	55	53
TAN CLAY w/ SMALL GRAVEL		55	65	10
SAND w/ SMALL GRAVEL		65	70	5
WHITE CLAY w/ SAND		70	90	20
TAN CLAY w/ SAND		90	120	30
TAN CLAY		120	155	35
SAND	X	155	170	15
CLAY w/ SAND		170	180	10
TAN CLAY w/ GRAVEL		180	195	15
SAND	X	195	205	10
CLAY w/ SAND		205	255	50
SAND	X	255	280	25

9. WELL CONSTRUCTION

Depth Drilled 280 Feet Depth Cased 275 Feet

HOLE DIAMETER (BIT SIZE)

	From	To	
<u>10 3/4</u> Inches	<u>0</u> Feet	<u>280</u> Feet	

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6.625</u>	<u>13</u>	<u>.188</u>	<u>+1.5</u>	<u>275</u>

Perforations:
Type of perforation PLASMA CUT / PERFORATOR
Size of perforation

From 155 feet to 180- PERF 4 ROWS feet
From 195 feet to 210- PERF 4 ROWS feet
From 255 feet to 275- PLASMA feet
From _____ feet to _____ feet
From _____ feet to _____ feet

Annular Seal: Yes No

Neat Cement 5 to 16 Pumped Poured
 Cement Grout _____ to _____ Pumped Poured
 Concrete Grout _____ to _____ Pumped Poured
 ≥30% Bentonite Grout _____ to _____ Pumped Poured

Gravel Pack: Yes No 50 to 275 Pumped Poured
Type: 3/8" WASHED PEA GRAVEL

Bentonite Chips: Yes No 16 to 50 Pumped Poured
Type: 3/8" BENTONITE CHIPS

Date started: 5-Dec _____ 20 11
Date completed: 6-Dec _____ 20 11

7. Water Level
Static water level: 128 feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: _____ °F
Quality: _____

8. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailor <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift			
<u>125 PSI @ 825 CFM</u>	<u>25</u>		<u>2 HOURS</u>

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 _____ 1408
Signed [Signature]
By driller performing actual drilling on site or contractor
Date 12/7/2011

(Rev. 05-06) 40.751534°N 115.556731°W NA027

USE ADDITIONAL SHEETS IF NECESSARY