

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

OFFICE USE ONLY
Log No. 116293
Permit No. 79031
Basin 179

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

1. OWNER Bath Lumber Co./Jim Bath
MAILING ADDRESS 1800 Ave G
Ely, NV 89301

NOTICE OF INTENT NO. 9030
ADDRESS AT WELL LOCATION 1800 Ave G
Ely, NV
Subdivision Name: _____ County: White Pine

2. LOCATION NE 1/4 NW 1/4 Sec 14 T 16 R 63 E
PERMIT/WAIVER No. 79031 002-127-02
Parcel No. _____

Latitude 39° 15.454 UTM E NAD 27
Longitude 114° 51.188 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

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Topsoil		0	10	10
Sand, Gravel		10	20	10
Sand, Gravel, Cobbles		20	40	20
85% Clay-Sand, Gravel		40	80	40
90% Coarse sand & gravel, 20% Clay		80	100	20
Brown Clay		100	105	5
85% Coarse sand & gravel, 15% Clay, ^{pink, white} fine		105	160	55
Brown Clay		160	165	5
90% Coarse sand & gravel, 10% Clay		165	200	35
Clay, Sand & Gravel		200	240	40
Clay, Sand & Boulders		240	260	20
Clay, Sand & Gravel		260	300	40

9. WELL CONSTRUCTION
Depth Drilled 300 Feet Depth Cased 300 Feet
HOLE DIAMETER (BIT SIZE)
From 12 1/2 Inches To 300 Feet
Inches _____ Feet _____
Inches _____ Feet _____

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8.625	22.36	.250 Steel	+2	40
8.625		SDR17	40	300

Perforations:
Type of perforation Mill
Size of perforation 1/8 x 2 1/2 x 8
From 160 feet to 200 feet
From 220 feet to 260 feet
From 280 feet to 300 feet

Annular Seal: Yes No
 Neat Cement 0 to 50 Pumped Poured
 Cement Grout _____ to _____ Pumped Poured
 Concrete Grout _____ to _____ Pumped Poured
 ≥30% Bentonite Grout _____ to _____ Pumped Poured
Gravel Pack: Yes No 50 to 300 Pumped Poured
Type: 3/8"
Bentonite Chips: Yes No _____ to _____ Pumped Poured
Type: _____

Date started: Sept. 10, 20 12
Date completed: Sept. 12, 20 12

7. Water Level
Static water level: 39 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>190</u>		<u>1 HR</u>

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name Gardner Brothers Drilling, Inc. Contractor
Address PO BOX 965 Contractor
Enterprise, UT 84725
Nevada contractor's license number 0069459
issued by the State Contractor's Board
Nevada driller's license number issued by the 2471
Division of Water Resources, the on-site driller
Signed James Hue
By driller performing actual drilling on-site or contractor
Date 9-13-12

RECEIVED
102 SEP 19 AM 11:2
STATE ENGINEERS OFFICE

39.257627°N
114.852282°W NAD27

USE ADDITIONAL SHEETS IF NECESSARY