

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

OFFICE USE ONLY
Log No. 116315
Permit No. 67427
Basin 045

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. 67803

1. OWNER SONORA LLC. ADDRESS AT WELL LOCATION COUNTY ROAD 708
MAILING ADDRESS P.O. BOX 1597
ELKO, NV 89803-1597 Subdivision Name: RURAL LANDS County: ELKO

2. LOCATION NE 1/4 NW 1/4 Sec 19 T 33N N/S R 58 E Latitude UTM E 11T 0628411 NAD 27
PERMIT/WAIVER No. 67427 Parcel No. 007-08C-004 Longitude N 4510264 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
TOP SOIL		0	.5	1
SAND & COBBLES	x	.5	35	35
CEMENTED SAND		35	105	70
CLAY		105	110	5
CLAY & SAND		110	115	5
CLAY		115	125	
SAND	XXX	125	170	45
CLAY		170	190	20
CLAY & SAND		190	215	25
SAND	XX	215	225	10
CLAY & SAND		225	235	10
SAND	XX	235	245	10
CLAY & SAND		245	265	20
SAND		265	270	5
CLAY & SAND		270	290	20
CLAY		290	325	35
SAND	XXX	325	340	15

9. WELL CONSTRUCTION

Depth Drilled 340 Feet Depth Cased 340 Feet

HOLE DIAMETER (BIT SIZE)

	From	To
12 3/4 Inches	0	340
Inches		
Inches		

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8.625	17	.188	+2	340

Perforations:

Type of perforation PLASMA CUT

Size of perforation 3/16" X 3" 16 ROW

From	feet to	feet
140	160	feet
220	240	feet
320	340	feet
		feet
		feet

Annular Seal: Yes No

	0 to		<input checked="" type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input checked="" type="checkbox"/> Neat Cement	0	65	<input checked="" type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> Cement Grout			<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> Concrete Grout			<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input checked="" type="checkbox"/> ≥30% Bentonite Grout	65	100	<input checked="" type="checkbox"/> Pumped	<input type="checkbox"/> Poured

Gravel Pack: Yes No 100 to 340 Pumped Poured

Type: 3/8" pea gravel

Bentonite Chips: Yes No Pumped Poured

Type:

Date started: 29-Dec 20 11
Date completed: 10-Jan 20 12

7. Water Level

Static water level: 61 feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: COLD °F
Quality: _____

8. WELL TEST DATA

TEST METHOD:	Bailer	Pump	Air Lift
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
825 CFM @ 160 PSI	500		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 1408

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

Date 1/10/2012