

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

OFFICE USE ONLY  
Log No. 119497  
Permit No. \_\_\_\_\_  
Basin 071

**PRINT OR TYPE ONLY**

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. 70453

1. OWNER **Andrea Goodman**  
MAILING ADDRESS **9195 Sabin**

ADDRESS AT WELL LOCATION **9195 Sabin**  
**Winnemucca, NV 89445**  
Subdivision Name: \_\_\_\_\_ County: **Humboldt**

2. LOCATION **NE $\frac{1}{4}$ NE $\frac{1}{4}$  Sec30T35N/ R38EE**  
Latitude **40.88359'** UTM E  NAD 27  
Longitude **117.74155'** N  NAD 83/WGS 84

PERMIT/WAIVER NO. **N/A** Parcel No. **010-645-08**  
*Issued by Water Resources*

3. WORK 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
Sand/clay		0	2	2
Boulders		2	80	78
Clay & sand		80	90	10
Cobbles		90	220	130
clay w/rock		220	240	20
Cobbles		240	290	50
gravel & sand	X	290	320	30
clay/rock		320	340	20
course gravel & Sand	X	340	380	40
Clay		380	400	20
Gravel & sand	X	400	430	30
Clay		430	450	20
Rock		450	455	5

RECEIVED  
2014 FEB 11 AM 11:06  
STATE ENGINEERS OFFICE

*Replaces unknown well log*

9. WELL CONSTRUCTION

Depth Drilled **455** Feet Depth Cased **455** Feet

HOLE DIAMETER (BIT SIZE)

From	To
11 Inches	0 Feet <b>455</b> Feet
_____ Inches	_____ Feet _____ Feet
_____ Inches	_____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<b>6 5/8</b>	<b>10</b>	<b>.188</b>	<b>+18"</b>	<b>455</b>

Perforations:

Type of perforation **Factory Cut**

Size of perforation **3/32 X 4**

From	_____ feet to	_____ 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	_____ to _____	<input checked="" type="checkbox"/> Pumped	<input 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"/> $\geq$ 30% Bentonite Grout	_____ to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
Gravel Pack: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>55</b> to <b>455</b>	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
Type: _____			
Bentonite Chips: <input type="checkbox"/> Yes <input type="checkbox"/> No	_____ to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
Type: _____			

Date started: **November 12, 2013**  
Date completed: **November 22, 2013**

7. Water Level

Static water level: **280** feet below land surface

Artesian Flow: **N/A** G.P.M. **N/A** P.S.I.

Water Temperature: **Cool** °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	<b>15-20</b>		<b>14</b>
<i>N/A test</i>			
<i>40.983686'</i>			
<i>117.340957'</i>			

10. DRILLER'S CERTIFICATION

This well was drilled under my supervision and the report is true to the best of my knowledge.

Name **Fred Anderson Drilling, Inc.**  
(CONTRACTOR)

Address **10760 S. Grass Valley Road**  
(CONTRACTOR)

**Winnemucca, NV 89445**

Nevada contractor's license number issued by the State Contractor's Board **021467**

Nevada driller's license number issued by the Division of Water Resources, the on-site driller **2083**

Signed *Chris [Signature]*

By driller performing actual drilling on site or contractor

Date **December 30, 2013**