

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

OFFICE USE ONLY  
Log No. 120323  
Permit No. \_\_\_\_\_  
Basin 0109

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. 70617

1. OWNER Sharon Bower  
MAILING ADDRESS P.O. Box 1503  
Winnemucca NV 89446  
2. LOCATION SE 1/4 NE 1/4 Sec 7 T 39 N/S R 39 E  
PERMIT/WAIVER No. 107-200-015

ADDRESS AT WELL LOCATION Paradise Estates 7th Numbered  
Subdivision Name: \_\_\_\_\_ County: Wmca NV  
Latitude UTM E 448064  NAD 27  
Longitude N 4569478  NAD 83/WGS 84

3. WORKED PERFORMED  
 New Well  Replace  Recondition  
 Deepen  Other

4. PROPOSED USE  
 Domestic  Irrigation  Test  
 Municipal/Industrial  Stock  Monitor

5. WELL TYPE  
 Cable  Rotary  RVC  
 Air  Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
TOP SOIL		0	9	
YELLOW CLAY		9	40	
SANDY CLAY		40	60	
YELLOW CLAY		60	90	
ROCKY CLAY		90	110	
SAND & GRAVEL CLAY		110	140	

9. WELL CONSTRUCTION

Depth Drilled 140 Feet Depth Cased 140 Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	Feet	To	Feet
<u>10 5/8</u>	0		<u>140</u>	

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 5/8</u>		<u>.138</u>	<u>1</u>	<u>140</u>

Perforations:  
Type of perforation CUT WITH TORCH  
Size of perforation 3/16 X 3

From 120 feet to 140 feet

Annular Seal:  Yes  No

Neat Cement to \_\_\_\_\_  Pumped  Poured

Cement Grout to \_\_\_\_\_  Pumped  Poured

Concrete Grout 5 to 30  Pumped  Poured

20% Bentonite Grout to \_\_\_\_\_  Pumped  Poured

Gravel Pack:  Yes  No 100 to 140  Pumped  Poured

Type: \_\_\_\_\_

Bentonite Chips:  Yes  No 30 to 100  Pumped  Poured

Type: 3/8

Date started: 5-9 .20  
Date completed: 5-14 .20

7. Water Level  
Static water level: 30 ft. feet below land surface  
Artesian Flow: \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
Water Temperature: Cold °F  
Quality: Good

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>Rotary</u>	<u>30</u>	<u>UNK</u>	<u>4 Hrs</u>

10. DRILLER'S CERTIFICATION

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

Name LBJ DRILLING & PUMP COMPANY, INC.  
Contractor

Address P.O. BOX 902 - Winnemucca, NV 89446  
Contractor

Nevada contractor's license number issued by the State Contractor's Board 0009605A

Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1807

Signed Joe Boggio  
By driller performing well drilling on site or contractor: Joe Boggio

Date \_\_\_\_\_