

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

OFFICE USE ONLY
Log No. 122412
Permit No. 19630
Basin No. 045

PRINT OR TYPE IN BLACK INK 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. 72764
WELL NAME (if applicable): _____

1. OWNER/CLIENT NAME MICHAEL GALLAGHER
MAILING ADDRESS P.O. BOX 280582
LAMOILLE, NV 89828

DETAILED ADDRESS AT WELL LOCATION 994 COUNTRY LANE
CORNER OF COUNTRY LN & CLUBINE
Subdivision Name: RURAL County: ELKO

2. PLS LOCATION NW ¼ NE ¼ 19 Sec 33N N/S 58 E
PERMIT/WAIVER NO. 19630 007-080-029
Issued by Water Resources Current Parcel No.

Latitude UTM E 628444 NAD 27
Longitude UTM N 4510447 NAD 83/WGS 84

3. WORKED PERFORMED
 New Well Deepen: Orig WL# _____
 Replacement: Original well log # _____
 Recondition: Original well log # 7186

4. PROPOSED USE
 Domestic Irrigation Monitor
 Mining / Dewater Com / Ind Stock
 Test / Other Mun / QM Rec

5. WELL TYPE
 Auger Rotary RVC
 Air Mud Sonic
 Other

6. LITHOLOGIC LOG				
Material Encountered	Lost Circ.	Water Strata	From	To
CLEANED OUT ORIGINAL 16 1/2" CASED HOLE TO 314'				
INSTALLED 12" CASING TO BOTTOM OF HOLE w/ CENTRALIZERS				
SAND PACKED ANNULAR SPACE w/ 6X9 SILICA SAND				
INSTALLED A SAND PACK FEED TUBE THROUGH A PLATE WELDED BETWEEN CASINGS				
INSTALLED A 2" ACCESS PORT				
<u>NAD 27</u>				
<u>40.736850°N</u>				
<u>115.478852°W</u>				

9. INSTRUCTION
Depth Drilled: 314 Feet Depth Cased: 314 Feet

HOLE DIAMETER (BIT SIZE)			
	From	To	
<u>14 3/4</u>	Inches <u>0</u>	Feet <u>314</u>	Feet
	Inches	Feet	Feet
	Inches	Feet	Feet

CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>12 3/4</u>	<u>49.61</u>	<u>.375</u>	<u>+1 1/2</u>	<u>114</u>
<u>12 3/4</u>	<u>STAINLESS</u>	<u>.375</u>	<u>114</u>	<u>314</u>

ANNULAR MATERIALS
Sanitary Seal Yes No

<input type="checkbox"/> Neat Cement	_____ to _____	<input 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"/> Bentonite Chips	_____ to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> Gravel Pack [> 0.2 in.]	_____ to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input checked="" type="checkbox"/> Sand Pack [< 0.2 in.]	<u>0</u> to <u>314</u>	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
<input type="checkbox"/> Other, explain:	_____ to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured

PERFORATIONS:
Type of perforation: STAINLESS STEEL
Size of perforation: 0.020 SLOTTED
From 114 Feet To 314 Feet
From _____ Feet To _____ Feet
From _____ Feet To _____ Feet
From _____ Feet To _____ Feet

Date started: 7-Apr, 20 15
Date completed: 17-Apr, 20 15

7. WATER QUALITIES
Static water level: 62 Feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: 48 ° Fahrenheit
Water Quality: GOOD

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision. This report is true to the best of my knowledge.
Name HACKWORTH DRILLING INC. Contractor
Address P.O. BOX 850, ELKO, NV 89803 Contractor

8. WELL TEST DATA			
Test Method:	G.P.M.	Draw Down (Feet Below Static)	Recorded Time (Hours)
<input type="checkbox"/> Bailor <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	<u>1100+</u>		<u>3 HOURS</u>

Nevada contractor's license number as issued by the State Contractor's Board: 16532
Nevada well driller's license number as issued by the Nevada Division of Water Resources (on-site driller): _____
Signed: Jerry C. Bern
By driller performing actual drilling on site or contractor
Date: 4/28/2015

RECEIVED
2015 MAY 11 PM 1:08
STATE ENGINEERS OFFICE
16532

(Rev. 12-13)

Reconditions well log 7186