

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

OFFICE USE ONLY
Log No. 123240
Permit No. _____
Basin No. 049

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. 73789
WELL NAME (if applicable): _____

1. OWNER/CLIENT NAME Aurelio & Lucia Ruiz
MAILING ADDRESS #47 Garcia Ln. Elko NV 89801

DETAILED ADDRESS AT WELL LOCATION Lot 11 Block L Last Chance
Unit # 13 Maple Rd. Elko NV 89801
Subdivision Name: Last Chance Ranches County: Elko

2. PLS LOCATION SE 1/4 NE 1/4 6 Sec 34 T15S 56E
PERMIT/WAIVER NO. 032-012-011
Issued by Water Resources Current Parcel No.

Latitude W 115.70213 UTM E NAD 27
Longitude N 40.86367 UTM N NAD 83/WGS 84

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

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

5. WELL TYPE
 Auger Rotary RVC
 Air Mud Sonic
 Other

6. LITHOLOGIC LOG					
Material Encountered	Lost Circ.	Water Strata	From	To	Thick-ness
Alluvium		NO	0'	25'	25'
Green Clay		NO	25'	80'	55'
Sand Stone		Yes	80'	95'	15'
Green Clay		NO	95'	200'	5'
Sand Stone		Yes	200'	205'	5'
Clay w/a little Rock		Yes	205'	235'	30'
Clay		NO	235'	255'	20'
Clay w/a little Rock		Yes	255'	265'	10'
Clay		NO	265'	300'	35'
Neat Cement			0'	60'	60'
3/8 Bentonite Chip			60'	68'	8'
3/8 Gravel			68'	300'	232'
6 5/8" 188 wall Blank			0'	250'	250'
6 5/8" 188 wall Slotted			250'	290'	40'
6 5/8" 188 wall Blank			290'	300'	10'

9. WELL CONSTRUCTION			
Depth Drilled:	Feet	Depth Cased:	Feet
<u>300'</u>		<u>300'</u>	

HOLE DIAMETER (BIT SIZE)			
Inches	From	To	Feet
<u>10 3/4"</u>	<u>0'</u>	<u>300'</u>	

CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 5/8"</u>		<u>188 wall</u>	<u>0'</u>	<u>250'</u>
<u>6 5/8"</u>		<u>188 wall</u>	<u>290'</u>	<u>300'</u>

PERFORATIONS:
Type of perforation: Mill Slott
Size of perforation: 1/8"
From 250' Feet To 290' Feet
From _____ Feet To _____ Feet
From _____ Feet To _____ Feet

ANNULAR MATERIALS

<input checked="" type="checkbox"/> Sanitary Seal <u>0'</u> to <u>60'</u>	<input checked="" type="checkbox"/> Pumped <input type="checkbox"/> Poured
<input checked="" type="checkbox"/> Neat Cement <u>0'</u> to <u>60'</u>	<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 <u>60'</u> to <u>68'</u>	<input checked="" type="checkbox"/> Pumped <input type="checkbox"/> Poured
<input checked="" type="checkbox"/> Bentonite Chips _____ to _____	<input type="checkbox"/> Pumped <input checked="" type="checkbox"/> Poured
<input type="checkbox"/> Bentonite Grout _____ to _____	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
<input type="checkbox"/> 15 % <input type="checkbox"/> 20 % <input type="checkbox"/> Other, explain: _____	
<input checked="" type="checkbox"/> Gravel Pack [> 0.2 in.] <u>68'</u> to <u>300'</u>	<input checked="" type="checkbox"/> Pumped <input type="checkbox"/> Poured
<input type="checkbox"/> Sand Pack [< 0.2 in.] _____ to _____	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
<input type="checkbox"/> Other, explain: _____	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured

7. WATER QUALITIES
Static water level: 180' Feet below land surface
Artesian Flow: NO G.P.M. _____ P.S.I.
Water Temperature: 60 ° 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 Hard Rock Exploration Contractor
Address 2190 Last Chance Rd. Elko NV 89801 Contractor
Nevada contractor's license number as issued by the State Contractor's Board: 0048915A
Nevada well driller's license number as issued by the Nevada Division of Water Resources (on-site driller): _____
Signed: _____
Date: 9-3-15

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>100'</u>	<u>6</u>		<u>1/2 hr.</u>
<u>220'</u>	<u>10</u>		<u>1/2 hr.</u>
<u>265'</u>	<u>14.7</u>		<u>1/2 hr.</u>
<u>300'</u>	<u>19.8</u>		<u>2 hrs.</u>

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