

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

OFFICE USE ONLY
Log No. 123366
Permit No. 68334
Basin 709

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. 35676

1. OWNER Ken Johnson ADDRESS AT WELL LOCATION Mile Marker #3 SR318 Lincoln
MAILING ADDRESS 1719 South Kitchellville Road Hiko NV 89017 Hiko NV 89017
Subdivision Name: _____ County: _____

2. LOCATION NE 1/4 NE 1/4 Sec 34 T 4 N R 60 E Latitude N37°33'68.5" UTM E NAD 27
PERMIT/WAIVER No. 68334 01-08-13 Longitude W115°13'73.2" N NAD 83/WGS 84

Issued by Water Resources Parcel No. _____

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	Thickness
<u>Sand - Boulders</u>	<u>X</u>	<u>97</u>	<u>225</u>	<u>128</u>
<u>Existing Annular Seal approved by Ken Hefley 5-26-2015 Carson City office</u>				
<u>original well log # 85640</u>				
DCNR/DWR/SNSD RECEIVED JUN 12 2015				

Date started: _____, 20
Date completed: _____, 20

9. WELL CONSTRUCTION

Depth Drilled 125' Feet Depth Cased 125' Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To
<u>7 7/8</u>	<u>0</u>	<u>225</u>

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 7/8</u>		<u>.188</u>	<u>0</u>	<u>225</u>

Perforations:

Type of perforation Torch
Size of perforation 1/8" x 6"

From	To	From	To
<u>105'</u>	<u>185'</u>	<u>205'</u>	<u>225'</u>

Annular Seal: Yes No

Neat Cement to _____ Pumped Poured
 Cement Grout to _____ Pumped Poured
 Concrete Grout 0 to 50 Pumped Poured
 ≥30% Bentonite Grout to _____ Pumped Poured

Gravel Pack: Yes No 50 to 225 Pumped Poured
Type: 3/8" minus

Bentonite Chips: Yes No to _____ Pumped Poured
Type: _____

7. Water Level

Static water level: 6.3 feet below land surface
Artesian Flow: 0 G.P.M. _____ P.S.I.
Water Temperature: cold °F
Quality: fair

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>175</u>		<u>2</u>

10. DRILLER'S CERTIFICATION

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

Name Davis Drilling and Pumps Contractor
Address HC 61 Box 54 Hiko NV 89017 Contractor

Nevada contractor's license number issued by the State Contractor's Board 0028966
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1191

Signed Mike Davis
By driller performing actual drilling on-site or contractor
Date 5-19-2015

(Rev. 05-06)

USE ADDITIONAL SHEETS IF NECESSARY

37.5615432 NAD
-115.2280922 27 (C) 627