MW-17

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

OFFICE USE ONLY
Log No. 123611
Permit No.
Basin 064

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. 70110

1. OWNER Battle Mt. Truck Stop
MAILING ADDRESS P.O. Box 14646
Spokane Valley WA. 99214

ADDRESS AT WELL LOCATION 1060 W. Front St
Battle Mt. NV.
Subdivision Name: County: Lander

2. LOCATION NE ¼ NE ¼ Sec 18 T 32 N/S R 45 E
PERMIT/WAIVER No. MO-2024
SW Issued by Water Resources
Parcel No. 02-2[illegible]09

Latitude 40.649673 N
Longitude -116.945864
UTM E
N
☐ NAD 27 ☒ NAD 83/WGS 84

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 Auger

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
SAND / SILT		0	5	5
SAND		5	10	5
SAND W/ GRAVEL		10	20	10

NAD 27
40.649708
116.944936

Date started: 10.12 , 20 15
Date completed: 10.12 , 20 15

9. WELL CONSTRUCTION
Depth Drilled 20 Feet Depth Cased 20 Feet

HOLE DIAMETER (BIT SIZE)

		From		To	
10	Inches	0	Feet	20	Feet
	Inches		Feet		Feet
	Inches		Feet		Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
4		SCH. 40	0	20

Perforations:
Type of perforation Manufactured
Size of perforation .020
From 5 feet to 20 feet
From feet to feet
From feet to feet
From feet to feet
From feet to feet

Annular Seal: ☐ Yes ☐ No
☒ Neat Cement 0 to 3 ☐ Pumped ☒ Poured
☐ Cement Grout to ☐ Pumped ☐ Poured
☐ Concrete Grout to ☐ Pumped ☐ Poured
☐ ≥30% Bentonite Grout to ☐ Pumped ☐ Poured

Gravel Pack: ☒ Yes ☐ No 4 to 20 ☐ Pumped ☒ Poured
Type: #3 Sand
Bentonite Chips: ☒ Yes ☐ No 3 to 4 ☐ Pumped ☒ Poured
Type: 3/8 bent. chips

7. Water Level
Static water level: 10 feet below land surface
Artesian Flow: G.P.M. P.S.I.
Water Temperature: °F
Quality:

8. WELL TEST DATA
TEST METHOD: ☐ Bailer ☐ Pump ☐ Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name Gregg Drilling & Testing Inc. (Contractor)
Address 950 Howe Rd Martinez CA 94553 (Contractor)
Nevada contractor's license number issued by the State Contractor's Board C23-0038113
Nevada driller's license number issued by the Division of Water Resources, the on-site driller M-2328
Signed [signature] (By driller performing actual drilling on site or contractor)
Date 10.19.15

(Rev. 05-06)

USE ADDITIONAL SHEETS IF NECESSARY