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NOTICE OF INTENT

No. 73716

Today's Date: 9-22-15 Intended Start Date: 9-25-15 Well ID (if applicable): _____

Type of Work to be Done: Drilling: Deepening: Reconditioning: Plugging:

Is this a replacement well? Yes No If there is an existing well, what is the well log number? NA

Proposed use of well: Test Hole Diameter of well: 6 inches Number of wells: 1

If this well is a domestic well, is it located within a water purveyor's service area? Yes No If yes, what is the DOM waiver: NA

If this is a monitor well required by another government agency, what is the facility ID number? NA Agency: NA

If this well is being completed under a waiver, please provide the corresponding waiver number: NA

If a water right is associated with this well, what is the permit number? 83949

Location of the well by Public Land Survey: NE 1/4 NE 1/4 Sec. 12 T 18 S R52 E

Latitude: 116.051572 UTM E _____ NAD 27

Longitude: 39.44924 or UTM N _____ NAD 83WGS 84

Address at well location: Stevens Basin

Assessor Parcel Number: _____

County: Eureka Subdivision Name: _____

Name of Client: Eureka County

Address of Client: PO Box 714 Eureka, NV. 89316

Contractor's License Number: 0021976 On-Site Driller's License Number: 2446

Company Name and Address: Boad Longyear Co. PO Box 2748 Elko NV 89803

Need Log Forms Need Intent Cards Driller's Signature: Bryan Bailey

(Rev. 1-14)

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**DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES
DIVISION OF WATER RESOURCES**

901 South Stewart Street, Suite 2002
Carson City, Nevada 89701-5250
(775) 684-2800 · Fax (775) 684-2811
<http://water.nv.gov>

**NOTICE OF INTENT CARD
APPROVAL FORM**

To: Boart Longyear - Aaron

Date: 09/29/2015

Facsimile No.: 775-753-5278

or E-mail Address: aaron.ogle@boartlongyear.com

This document was:

E-mailed

Faxed

NOI Card Number: 73716

Approved

Rejected (See reasons below)

Work performed	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Proposed use of well	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Intended start date	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Waiver/Permit number if applicable	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Well location (legal description, GPS coordinates)	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Parcel number	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Address at well location	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Permit number	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Waiver number or NDEP Facility ID Number	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Address of Client	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Name of client/owner	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Contractor's license number	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Onsite well driller's license number	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Drilling company name/address	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Driller's signature	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Replacement well	Yes	<input type="checkbox"/>		

If yes, existing well must be plugged at time the replacement well is drilled, pursuant to NAC 534.300 Replacement Well.

**Instructions: TEST HOLES MUST BE PLUGGED WITHIN 60 DAYS OF COMPLETION.
REFERENCE PERMIT 83949**

Person reviewing NOI Card: Jake Echeverria (775) 684-2813

Date reviewed: 09/29/2015

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