

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

OFFICE USE ONLY
Log No. 123941
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. 72618
WELL NAME (if applicable): _____

1. OWNER/CLIENT NAME Darrell Lewis
MAILING ADDRESS 1188 Court St PMB 27
Elko, NV 89801

DETAILED ADDRESS AT WELL LOCATION _____
2935 Lupine St Elko, NV
Subdivision Name: MVR #5 County: Elko

2. PLS LOCATION ne 1/4 sw 1/4 33 Sec 35 N/S 55 E Latitude 40.373.78' UTM E NAD 27
PERMIT/WAIVER NO. 037-022-009 Longitude 115.786.75' UTM N NAD 83/WGS 84

Issued by Water Resources Current Parcel No.

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

4. PROPOSED USE
 Domestic Irrigation Monitor
 Mining / Dewater Corn / 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
Fill			0	12
Clay and Gravel			12	27
Hard Pan			27	32
Clay and Gravel			32	50
White Sandstone			50	150
Sandstone			150	175
Fractured Sandstone			175	180
Sandstone			180	227
Fractured Sandstone			227	230
Sandstone			230	250
Fractured Sandstone			250	252
Sandstone			252	312
Fractured Sandstone		X	312	314
Sandstone			314	328
Gravel and Sand		X	328	335
Sandstone			335	340
Gravel and Volcanic Ash		X	340	366

9. INSTRUCTION
Depth Drilled: 366 Feet Depth Cased: 363 Feet

HOLE DIAMETER (BIT SIZE)

From	To
<u>9 7/8</u> Inches	<u>0</u> Feet <u>366</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>6 5/8</u>		<u>SDR 17</u>	<u>22</u>	<u>363</u>
<u>6 5/8</u>		<u>.025</u>	<u>+ 1.5</u>	<u>22</u>

ANNULAR MATERIALS

Sanitary Seal Yes No

Material	From	To	Notes
<input checked="" type="checkbox"/> Neat Cement	<u>0</u>	<u>20</u>	<input type="checkbox"/> Pumped <input checked="" type="checkbox"/> Poured
<input type="checkbox"/> Cement Grout	_____	_____	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
<input type="checkbox"/> Concrete Grout	_____	_____	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
<input checked="" type="checkbox"/> Bentonite Chips	<u>20</u>	<u>50</u>	<input type="checkbox"/> Pumped <input checked="" type="checkbox"/> Poured
<input checked="" type="checkbox"/> Gravel Pack [> 0.2 in.]	<u>366</u>	<u>50</u>	<input type="checkbox"/> Pumped <input checked="" type="checkbox"/> Poured
<input type="checkbox"/> Sand Pack [< 0.2 in.]	_____	_____	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
<input type="checkbox"/> Other, explain:	_____	_____	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured

Date started 19-Oct 20 15
Date completed 23-Oct 20 15

7. WATER QUALITIES
Static water level: 150 Feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: _____ ° Fahrenheit
Water Quality: _____

8. WELL TEST DATA

Test Method: Bailor Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Recorded Time (Hours)
<u>20</u>		<u>1 hr</u>
_____	_____	_____
_____	_____	_____

PERFORATIONS:

Type of perforation: Mill Slot

Size of perforation: _____

From	To
<u>343</u> Feet	<u>363</u> Feet
_____ Feet	_____ Feet
_____ Feet	_____ Feet
_____ Feet	_____ Feet
_____ Feet	_____ Feet

10. DRILLER'S CERTIFICATION

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

Name Fertig Drilling Co. Contractor
Address P.O. Box 525 Elko, NV 89803 Contractor

Nevada contractor's license number as issued by the State Contractor's Board: 031904
Nevada well driller's license number as issued by the Nevada Division of Water Resources (on-site driller): 2480

Signed: Marko Walker Jr.
Date: 10-28-15

By driller performing actual drilling on site or contractor