

OFFICE USE ONLY
Log No. 31617
Permit No. _____
Basin. 13-207

WELL DRILLER'S REPORT

Please complete this form in its entirety

NOTICE OF INTENT NO. 11232

PRINT OR TYPE ONLY

1. OWNER Milton Judd ADDRESS AT WELL LOCATION _____
MAILING ADDRESS SR2, Box 19 Ely, N.V. 89301 Same

2. LOCATION NE 1/4 NW 1/4 Sec. 12 T. 12 N/S R. 61 E White Pine County _____
PERMIT NO. _____ Issued by Water Resources Parcel No. _____ Subdivision Name Preston Township plat lot 6 block 14A

3. TYPE OF WORK	4. PROPOSED USE	5. TYPE WELL
New Well <input checked="" type="checkbox"/> Recondition <input type="checkbox"/>	Domestic <input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Test <input type="checkbox"/>	Cable <input checked="" type="checkbox"/> Rotary <input type="checkbox"/>
Deepen <input type="checkbox"/> Other <input type="checkbox"/>	Municipal <input type="checkbox"/> Industrial <input type="checkbox"/> Stock <input type="checkbox"/>	Other <input type="checkbox"/>

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
gravelly soil		0	5	
Cemented cobbles		5	12	
gravel conglomerate		12	39	
clay		39	52	
gravel con.		52	79	
gravel	water	79	80	
gravel con.		80	95	
gravel	water	95	97	
gravel con.		97	115	
gravel	water	115	116	
gravel con.		116	125	
gravel	water	125	126	
gravel con.		126	135	

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8. WELL CONSTRUCTION

Diameter 6 inches Total depth 135 feet

Casing record 136'

Weight per foot 12.4 Thickness 212

Diameter	From	To
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet

Surface seal: Yes No Type Concrete grout

Depth of seal 0-50 feet

Gravel packed: Yes No

Gravel packed from 50 feet to 135 feet

Perforations:

Type perforation torch

Size perforation 1/2" x 12"

From 95' feet to 135' feet

9. WATER LEVEL

Static water level 78' feet below land surface

Flow _____ G.P.M. _____ P.S.I.

Water temperature warm °F Quality good

Date started April 24, 1987

Date completed May 6, 1987

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump

BAILER TEST

G.P.M. 40 Draw down 2 feet 1 hours

G.P.M. _____ Draw down _____ feet _____ hours

G.P.M. _____ Draw down _____ feet _____ hours

10. DRILLER'S CERTIFICATION

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

Name Nathan R. Maynard Contractor

Address P.O. Box 176 Lund N.V. 89317 Contractor

Nevada contractor's license number issued by the State Contractor's Board 0022869

Nevada contractor's driller's number issued by the Division of Water Resources 1538

Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1556

Signed Nathan Maynard By driller performing actual drilling on site or contractor

Date May 12 1989