

OFFICE USE ONLY  
 Log No. 38209  
 Permit No. 49  
 Basin 49

PRINT OR TYPE ONLY  
 DO NOT WRITE ON BACK

WELL DRILLER'S REPORT

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. \_\_\_\_\_

1. OWNER CHEVRON USA ADDRESS AT WELL LOCATION HWY 40, 10TH ST. CARLIN, NEVADA  
 MAILING ADDRESS P.O. BOX 220 SEATTLE, WA  
 2. LOCATION SE 1/4 NE 1/4 Sec 27 T 33 N/R 52 E MDM ELKO County  
 PERMIT NO. M-0297A Issued by Water Resources Parcel No. \_\_\_\_\_ Subdivision Name \_\_\_\_\_

3. WORK PERFORMED  
 New Well  Replace  Recondition  
 Deepen  Abandon  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	Thick-ness
<b>ABANDONMENT PROCEDEURE:</b>				
The well before plugging had sand within 5' of the bottom. The well was first flushed out and then it was perforated every 5' with 4 each 1/2" holes. It was then grouted using the prescribed regulation cement/bentonite mixture, using a tremie pipe from the bottom up. The surface casing was removed and the top 2" of the PVC well was terminated 2' below the existing ground surface.				
<i>QA Log # 36126</i>				

8. WELL CONSTRUCTION  
 Depth Drilled \_\_\_\_\_ Feet Depth Cased \_\_\_\_\_ Feet  
 HOLE DIAMETER (BIT SIZE)  
 From \_\_\_\_\_ To \_\_\_\_\_  
 Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 CASING SCHEDULE  

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)

 Perforations: 4 each 1/2" holes every 5'  
 Type perforation \_\_\_\_\_ of well length.  
 Size perforation \_\_\_\_\_  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 Surface Seal:  Yes  No Seal Type:  
 Neat Cement  
 Cement Grout  
 Concrete Grout  
 Placement Method:  Pumped  Poured  
 Gravel Packed:  Yes  No  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Date started 2-13, 1992  
 Date completed 2-20, 1992

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift			

9. WATER LEVEL  
 Static water level \_\_\_\_\_ feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature \_\_\_\_\_ °F Quality \_\_\_\_\_

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.  
 Name P. C. EXPLORATION  
 Address P. O. BOX 96  
 Contractor WOODS CROSS, UT 84087  
 Nevada contractor's license number issued by the State Contractor's Board 0028767  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1605  
 Signed Ray Fraser (Ray Fraser)  
 By driller performing actual drilling on site or contractor  
 Date 2-27-92