

OFFICE USE ONLY  
 Log No. 43077  
 Permit No. J  
 Basin 49  
 NOTICE OF INTENT NO. 23310

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

1. OWNER John Culver ADDRESS AT WELL LOCATION Lot 7 BIK  
 MAILING ADDRESS 550 S JUNEEAN ST EIKO MUR #4 27th ST CROW AVE  
 2. LOCATION NE 1/4 NW 1/4 Sec 19 T 35 N/S R 56 E EIKO County  
 PERMIT NO. 36-007-05-2 MUR #4 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

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Top Soil		0	8	8
Cemented Gravel		8	102	94
CLAY		102	130	18
Cemented Gravel		130	129	9
CLAY		129	134	5
Cemented Gravel		134	239	105
Gravel	X	239	260	21

8. WELL CONSTRUCTION  
 Depth Drilled 260 Feet Depth Cased 260 Feet  
 HOLE DIAMETER (BIT SIZE)  
 From To  
10 Inches 0 Feet 62 Feet  
8 3/4 Inches 62 Feet 260 Feet  
 Inches Feet Feet  
 CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6	12.92	1.88	12	260

Perforations:  
 Type perforation Slots  
 Size perforation  
 From 238 feet to 260 feet  
 From feet to feet  
 From feet to feet  
 From feet to feet  
 From feet to feet  
 Surface Seal:  Yes  No Seal Type:  
 Depth of Seal 60  Neat Cement  
 Placement Method:  Pumped  Cement Grout  
 Poured  Concrete Grout  
 Gravel Packed:  Yes  No  
 From 60 feet to 260 feet  
 9. WATER LEVEL  
 Static water level 160 feet below land surface  
 Artesian flow G.P.M. P.S.I.  
 Water temperature Cold °F Quality Good

93 DEC -7 AM 05  
 RECEIVED  
 STATE ENGINEERS OFFICE

Date started 11-15, 1993  
 Date completed 11-22, 1993

7. WELL TEST DATA

TEST METHOD: <input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift			
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)	
<u>40</u>	<u>NA</u>	<u>4</u>	

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.  
 Name Fertig Drilling Co Contractor  
 Address P.O. Box 525 Contractor  
EIKO NV 89803  
 Nevada contractor's license number issued by the State Contractor's Board 31904  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1584  
 Signed Shaul C Fertig  
 By driller performing actual drilling on site or contractor  
 Date 12-1-93