

OFFICE USE ONLY  
 Log No. 50607, 50608  
 Permit No. 017  
 Basin 017

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. 30771

1. OWNER Indian Health Services ADDRESS AT WELL LOCATION Owyhee Nevada Hospital  
 MAILING ADDRESS New Highway 225  
Owyhee, Nevada 89832  
 2. LOCATION NW 1/4 NE 1/4 Sec. 26 T 46 N/S R 52 E Elko County  
 PERMIT NO. M/O 942 MW-5 Duck Valley Indian Reservation  
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

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Asphalt		0	3"	3"
Sand & gravel		3"	8'	7.9"
Boulders & clay	damp	8	24	16
Hard rock		24	28	4
Volcanic rock with seams of clay		28	55	27
Hole damp at 17'-25'				
Hole wet at 45'				
Set 1st pvc to 55' sand packed with silica sand to 39' Placed 3/8 bentonite seal from 31' to 39'				
Added sand to 30'				
Set 2nd pvc to 30' sand packed with silica sand to 13'				
Placed 3/8 bentonite seal from 5' to 13'				
Cement from 0 - 5' and set vault flush with asphalt				

8. WELL CONSTRUCTION  
 Depth Drilled 55 Feet Depth Cased 55 Feet  
 HOLE DIAMETER (BIT SIZE)  

From	To
9-1/2 Inches	0 Feet 30 Feet
8 Inches	30 Feet 55 Feet
Inches	Feet Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
2"	pvc	Sch 40	0	55
2"	pvc	Sch 40	0	30

Perforations:  
 Type perforation Mill slot  
 Size perforation .020  
 From 40 feet to 55 feet  
 From 15 feet to 30 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 Surface Seal:  Yes  No Seal Type:  
 Depth of Seal 5  Neat Cement  
 Placement Method:  Pumped  Cement Grout  
 Poured  Concrete Grout  
 Gravel Packed:  Yes  No  
 From 39 to 55' feet to 13' to 30' feet

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 Hackworth Drilling, Inc. Contractor  
 Address P.O. Box 850 Contractor  
Elko, NV 89803  
 Nevada contractor's license number issued by the State Contractor's Board 020582  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1654  
 Signed John C. Davis  
By driller performing actual drilling on site or contractor  
 Date 9/28/95

Date started September 19 1995  
 Date completed September 19 1995

7. WELL TEST DATA

TEST METHOD: <input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift		
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
Not tested		

RECEIVED  
 95 OCT 10 AM 10:30  
 STATE ENGINEERS OFFICE