WHITE - DIVISION OF WATER RESOURCES
CANARY - CLIENT'S COPY
PINK - WELL DRILLER'S COPY

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

STATE OF NEVADA
DIVISION OF WATER RESOURCES

WELL DRILLER'S REPORT

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

OFFICE USE ONLY
Log No. 64167
Permit No.
Basin 054

NOTICE OF INTENT NO. 30383

1. OWNER STEVE STUELKE
MAILING ADDRESS HC 66 BOX 3
BEOWAWE, NV 89821

ADDRESS AT WELL LOCATION
5 MILES NORTH OF CRESCENT VALLEY, NV

2. LOCATION SW 1/4 SW 1/4 Sec. 5 T 30N N/S R 48E E EUREKA County
PERMIT NO. _____ Issued by Water Resources
5-170-01 Parcel No.
TRACT OF LAND Subdivision Name

3. WORK PERFORMED
[X] New Well [ ] Replace [ ] Recondition
[ ] Deepen [ ] Abandon [ ] Other _____

4. PROPOSED USE
[X] Domestic [ ] Irrigation [ ] Test
[ ] Municipal/Industrial [ ] Monitor [ ] Stock

5. WELL TYPE
[ ] Cable [ ] Rotary [ ] RVC
[X] Air [ ] Other _____

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
BOULDERS		0	40	40
HARD VOLCANICS		40	170	130
BROWN SILTSTONE		170	270	100
HARD VOLCANICS		270	300	30
BROWN VOLCANICS		300	875	575
BLACK VOLCANICS		875	1000	125

Date started 11/13/96, 19__
Date completed 11/20/96, 19__

7. WELL TEST DATA

TEST METHOD: [ ] Bailer [ ] Pump [X] Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
0		4

8. WELL CONSTRUCTION

Depth Drilled 1000 Feet Depth Cased 0 Feet

HOLE DIAMETER (BIT SIZE)

		From	To
10 5/8 Inches		0 Feet	590 Feet
5 1/2 Inches		590 Feet	1000 Feet
Inches		Feet	Feet

CASING SCHEDULE

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

Perforations:
Type perforation N/A
Size perforation N/A
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet

Surface Seal: [ ] Yes [X] No
Depth of Seal N/A
Placement Method: [ ] Pumped [ ] Poured
Seal Type: [X] Neat Cement [ ] Cement Grout [ ] Concrete Grout

Gravel Packed: [X] Yes [ ] No
From _____ feet to _____ 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 1689

Signed [signature] By driller performing actual drilling on-site or contractor
Date 11-26-96