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. 04585
Permit No.
Basin 054

NOTICE OF INTENT NO. 33196

1. OWNER STAN JURACK
MAILING ADDRESS P.O. BOX 211142
CRESCENT VALLEY, NV 89821

ADDRESS AT WELL LOCATION
NO. OF MCDANIEL RD - 1/2 MILE NO. OF CRESCENT VALLEY

2. LOCATION NW 1/4 SE 1/4 Sec. 33 T 30N N/S R 48E E EUREKA County
PERMIT NO. _____ Issued by Water Resources | 05-240-08 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	Thick-ness
TOPSOIL		0	3	3
BOULDERS & GRAVEL		3	10	7
BROWN CLAY		10	35	25
SAND & GRAVEL	X	35	100	65

Date started 1/8/97, 19__
Date completed 1/9/97, 19__

7. WELL TEST DATA

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

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
60		3

8. WELL CONSTRUCTION
Depth Drilled 100 Feet Depth Cased 95 Feet

HOLE DIAMETER (BIT SIZE)

		From	To
10 5/8	Inches	0 Feet	100 Feet
	Inches	Feet	Feet
	Inches	Feet	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	13	.188	+1	95

Perforations:
Type perforation MILLSLOT
Size perforation 3/16 X 3
From 75 feet to 95 feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet

Surface Seal: [X] Yes [ ] No
Depth of Seal 50
Placement Method: [X] Pumped [ ] Poured
Seal Type: [X] Neat Cement [ ] Cement Grout [ ] Concrete Grout

Gravel Packed: [X] Yes [ ] No
From 50 feet to 95 feet

9. WATER LEVEL
Static water level 35 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 1-22-97