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. 65916
Permit No.
Basin 019

NOTICE OF INTENT NO. 33200

1. OWNER BRAD ROBERTS
MAILING ADDRESS P.O. BOX 1755
ELKO, NV 89803

ADDRESS AT WELL LOCATION
8 MILE EAST OF ELKO - EAST SIDE OF I-80

2. LOCATION NE 1/4 SW 1/4 Sec. 2 T 35N N/S R 56E E ELKO County
PERMIT NO. _____ Issued by Water Resources
06-32A-01-2 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
TOPSOIL		0	15	15
BROWN CLAY		15	30	15
BROWN SILTSTONE & GRAVEL	X	30	100	70

RECEIVED 97 MAR -6 AM 11:26 STATE ENGINEER'S OFFICE

Date started 1/30/97, 19__
Date completed 1/31/97, 19__

7. WELL TEST DATA
TEST METHOD: [ ] Bailer [ ] Pump [X] Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
30		3

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

Perforations:
Type perforation MILLSLOT
Size perforation 3/16 X 3
From 80 feet to 100 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: [ ] Pumped [X] Poured
Seal Type: [X] Neat Cement [ ] Cement Grout [ ] Concrete Grout

Gravel Packed: [X] Yes [ ] No
From 50 feet to 100 feet

9. WATER LEVEL
Static water level 32 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 2-24-96