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. 66811
Permit No.
Basin 037

NOTICE OF INTENT NO. 37252

1. OWNER HUMBOLDT NATIONAL FOREST
MAILING ADDRESS 1750 FRONT STREET
BOISE, I.D. 83702

ADDRESS AT WELL LOCATION
WILDHORSE CROSSING CAMP GROUNDS

2. LOCATION NW ¼ SE ¼ Sec. 9 T. 44 (N)S R. 54 E. EIKO County
PERMIT NO. (Issued by Water Resources) Parcel No. WELL #2 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	Thickness
DRILLED DOWN BESIDE CASING TO RELEASE SURFACE SEAL. PULLED CASING UP 3', FLUSHED OUT GRAVEL PACK, PLACE SEAL ON TOP OF CASING, PUMP FULL OF CONCRETE GROUT. PULLED 20' OF CASING AND PUMPED IN MORE CONCRETE AT 20' STAGES. ALL CASING AND JUNK REMOVED FROM WELL. WELL FILLED TO WITHIN 2' OF SURFACE WITH CONCRETE GROUT				

Date started 10-22, 19 96
Date completed 10-23, 19 96

7. WELL TEST DATA
TEST METHOD: ☐ Bailer ☐ Pump ☐ Air Lift

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

8. WELL CONSTRUCTION
Depth Drilled ____ Feet Depth Cased 137 Feet

HOLE DIAMETER (BIT SIZE)

	From	To
Inches	Feet	Feet
Inches	Feet	Feet
Inches	Feet	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6	17.02	.250	+3	137

Perforations:
Type perforation
Size perforation
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet

Surface Seal: ☐ Yes ☐ No
Depth of Seal 137
Placement Method: ☒ Pumped ☒ Poured
Seal Type: ☐ Neat Cement ☐ Cement Grout ☒ Concrete Grout

Gravel Packed: ☐ 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 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 [signature] (By driller performing actual drilling on site or contractor)
Date 12-3-96

(Rev. 3-91)

USE ADDITIONAL SHEETS IF NECESSARY

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