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. 67621
Permit No.
Basin 045

NOTICE OF INTENT NO. 35445

1. OWNER TOM KUHL
MAILING ADDRESS 773 JUNIPER ST.
ELKO, NV 89801

ADDRESS AT WELL LOCATION
SHIRLEY LANE - NEAR PLEASANT VALLEY

2. LOCATION NW 1/4 SE 1/4 Sec. 23 T 33N N/S R 57E E ELKO County
PERMIT NO. _____ Issued by Water Resources | 6-52D-25 Parcel No. | SPECIAL LANDS 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 [X] Rotary [ ] RVC
[X] Air [ ] Other _____

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
TOPSOIL		0	3	3
CEMENTED GRAVEL & BOULDERS		3	90	87
SAND & GRAVEL	X	90	180	90

Date started 4/10/97, 19__
Date completed 4/10/97, 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 180 Feet Depth Cased 180 Feet

HOLE DIAMETER (BIT SIZE)

		From	To
10 5/8	Inches	0 Feet	180 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	180

Perforations:
Type perforation MILLSLOT
Size perforation 3/16 X 3
From 140 feet to 180 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 100'
Placement Method: [ ] Pumped [X] Poured
Seal Type: [ ] Neat Cement [ ] Cement Grout [X] Concrete Grout

Gravel Packed: [X] Yes [ ] No
From 100 feet to 180 feet

9. WATER LEVEL
Static water level 97 feet below land surface
Artesian flow ____ G.P.M. ____ P.S.I.
Water temperature COLD °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 4-16-97