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. 69345
Permit No. 49
Basin

NOTICE OF INTENT NO. 38[illegible]

1. OWNER KL PARTNERSHIP
MAILING ADDRESS 609 ASH ST
ELKO, NV 89801

ADDRESS AT WELL LOCATION
NE CORNER OF JUSTIN & COMANCHE ELKO, NV

2. LOCATION NW 1/4 SW 1/4 Sec. 3 T 35N N/S R 56E E ELKO County
PERMIT NO. _____ (Issued by Water Resources) 35-021-05 (Parcel No.) MVR #3 (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	Thickness
TOPSOL		0	3	3
SILTSTONE		3	30	27
BLUE SILTSTONE		30	80	50
BROWN SILTSTONE & GRAVEL	X	80	200	120

Date started 10/29/97, 19__
Date completed 10/29/97, 19__

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

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
30		2

8. WELL CONSTRUCTION
Depth Drilled 200 Feet Depth Cased 200 Feet

HOLE DIAMETER (BIT SIZE)

		From	To
10 5/8	Inches	0 Feet	200 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	12	.188	+1	200

Perforations:
Type perforation MILLSLOT
Size perforation 3/16 X 3
From 180 feet to 200 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 50'
Placement Method: [ ] Pumped [X] Poured
Seal Type: [ ] Neat Cement [ ] Cement Grout [X] Concrete Grout

Gravel Packed: [ ] Yes [X] No
From 50 feet to 200 feet

9. WATER LEVEL
Static water level 80 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 11-01-97