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. 69348
Permit No.
Basin 37

NOTICE OF INTENT NO. 38576

1. OWNER COLIN PERRY
MAILING ADDRESS P.O. BOX 206
MOUNTAIN CITY, NV 89831

ADDRESS AT WELL LOCATION
SR 225 AT MILE MARKER 106, NEAR MT. CITY, NV

2. LOCATION NW 1/4 SW 1/4 Sec. 19 T 45N N/S R 54E E ELKO County
PERMIT NO. (Issued by Water Resources) 05-620-003 (Parcel No.) TRACT OF LAND (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
Perforate 20-80' with mills knife 1/4 X 1" cuts				
Pump 100 gallon of abandonite from 80-145'				
Pump 150 gallon of neat cement from 5-80'				
cut off casing 5' below ground level				

Date started 10-28-97 , 19__
Date completed 10-28-97 , 19__

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

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

8. WELL CONSTRUCTION
Depth Drilled ____ Feet Depth Cased 145 Feet

HOLE DIAMETER (BIT SIZE)

		From	To
unk	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 5/8		.156	5	80
4			80	145

Perforations:
Type perforation torchcut
Size perforation
From 80 feet to 145 feet
From feet to feet
From feet to feet
From feet to feet
From feet to feet

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

Gravel Packed: ☐ Yes ☐ No
From UNK feet to ____ feet

9. WATER LEVEL
Static water level 15 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 11-14-97