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. 69753
Permit No. 49
Basin

NOTICE OF INTENT NO. 36540

1. OWNER: Summit Engineering
MAILING ADDRESS: 607 S. 5th Street, Elko, Nv 89801
ADDRESS AT WELL LOCATION: 1450 Idaho Street

2. LOCATION: SW ¼ SW ¼ Sec. 11 T. 34 N/S R. 55 E. Elko County
PERMIT NO. (Issued by Water Resources) 001-590-001 (Parcel No.) City of Elko (Subdivision Name) Well #1

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
Could not pull casing - Cemented in Road. Knocked out bottom of casing and pumped from bottom to top of Well with neat Cement		54	0	
Pumped 6 bags cement through 1" trimie pipe from bottom to top.				

Date started 12-8, 1997
Date completed 12-8, 1997

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 ____ Feet

HOLE DIAMETER (BIT SIZE)

	From	To
2" PVC Inches	0 Feet	54 Feet
Inches	Feet	Feet
Inches	Feet	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)

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 54'
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 (Contractor) Fertig Drilling Co.
Address (Contractor) P.O. Box 525, Elko, Nv 89803
Nevada contractor's license number issued by the State Contractor's Board 0031904
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1584
Signed (By driller performing actual drilling on site or contractor) Shane C. Fertig
Date 12-8-97

(Rev. 3-91)

USE ADDITIONAL SHEETS IF NECESSARY

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