



WELL DRILLER'S REPORT

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. 38402

PRINT OR TYPE ONLY  
 DO NOT WRITE ON BACK

1. OWNER **BLM-Winnemucca Field Office** ADDRESS AT WELL LOCATION \_\_\_\_\_  
 MAILING ADDRESS **5100 E. Winnemucca Blvd.** **Trap Butte Well**  
**Winnemucca, NV 89445**

2. LOCATION **SW** 1/4 **NE** 1/4 Sec. **9** T **40N** N/S R **39E** E **Humboldt** County  
 PERMIT NO. \_\_\_\_\_ Issued by Water Resources Parcel No. \_\_\_\_\_ 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	Thick-ness
Unable to pull casing				
Could not perforate due to wall thickness				
Filled with 3/8 granular bentonite hydrated with clear water from 120 to 50 ft.				
Filled with concrete grout from surface to 50 ft.				

8. WELL CONSTRUCTION

Depth Drilled \_\_\_\_\_ Feet Depth Cased \_\_\_\_\_ 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)
7		.375		

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
From _____	feet to _____	feet

Surface Seal:  Yes  No Seal Type: \_\_\_\_\_  
 Neat Cement  
 Cement Grout  
 Concrete Grout

Depth of Seal \_\_\_\_\_  
 Placement Method:  Pumped  Poured

Gravel Packed:  Yes  No  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

9. WATER LEVEL

Static water level dry 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 **Humboldt Drilling & Pump Co., Inc.** Contractor  
 Address **4675 W. Winnemucca Blvd** Contractor  
**Winnemucca, NV 89445**

Nevada contractor's license number issued by the State Contractor's Board **015234**  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1562**

Signed *Jerry Tompkins*  
 by driller performing actual drilling on-site or contractor  
 Date **11-30-97**

Date started **11/12/97**, 19\_\_\_\_  
 Date completed **11/12/97**, 19\_\_\_\_

7. WELL TEST DATA

TEST METHOD:	G.P.M.	TEST METHOD:	
		<input type="checkbox"/> Bailer Draw Down (Feet Below Static)	<input type="checkbox"/> Pump <input type="checkbox"/> Air Lift Time (Hours)