

OFFICE USE ONLY  
 Log No. 71687  
 Permit No. 133  
 Basin 133

PRINT OR TYPE ONLY  
 DO NOT WRITE ON BACK

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. 32379

1. OWNER VALT PLASKETT ADDRESS AT WELL LOCATION \_\_\_\_\_  
 MAILING ADDRESS BOX 10  
EUREKA NEV. 89316  
 2. LOCATION N.E. 1/4 NW 1/4 Sec. 5 T. 21 N. R. 54 E. EUREKA County  
 PERMIT NO. 19015 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 Domestic

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
BORE HOLE WAS				
DRILLED TO 296 FT				
CAVED IN				
NOT CASED				
BACK FILLED WITH				
NATURAL SAND AND				
GRAVEL ETC.				

8. WELL CONSTRUCTION  
 Depth Drilled \_\_\_\_\_ Feet Depth Cased \_\_\_\_\_ Feet  
 HOLE DIAMETER (BIT SIZE)  
 From \_\_\_\_\_ To \_\_\_\_\_  
29 Inches 0 Feet 296 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

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 \_\_\_\_\_ 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 PLASKETT IRRIGATION Contractor

Date started 12-10-97, 19\_\_\_\_  
 Date completed BACK FILLED 12-12-97, 19\_\_\_\_

7. WELL TEST DATA

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

Address Box 10 Contractor  
EUREKA NEV. 89316  
 Nevada contractor's license number issued by the State Contractor's Board 11882  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 035  
 Signed Janice S. Smith  
 By driller performing actual drilling on site or contractor  
 Date 12-18-97