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. 71909
Permit No.
Basin 44

NOTICE OF INTENT NO. 39285

1. OWNER **DEL TERVORT**
MAILING ADDRESS **P.O. BOX 434**
CARLIN, NV 89822

ADDRESS AT WELL LOCATION
6 MILES NORTH OF RYNDON - OFF COAL MINE ROAD
ELKO, NV

2. LOCATION **SE** 1/4 **NW** 1/4 Sec. **5** T **36N** N/S R **57E** E **ELKO** County
PERMIT NO. _____ Issued by Water Resources
06-55B-007 Parcel No.
TRACT OF LAND 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
TOPSOIL		0	3	3
SAND & GRAVEL		3	20	17
SILTSTONE		20	160	140
SILTSTONE & GRAVEL	X	160	260	100

Date started **5/18/98**, 19__
Date completed **5/18/98**, 19__

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

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
20		3

8. WELL CONSTRUCTION
Depth Drilled **260** Feet Depth Cased **260** Feet

HOLE DIAMETER (BIT SIZE)

		From	To
10 5/8	Inches	0 Feet	260 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	13	.188	+1	260

Perforations:
Type perforation **MILLSLOT**
Size perforation **3/16 X 3**
From **240** feet to **260** feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet

Surface Seal: [X] Yes [ ] No
Depth of Seal **50'**
Placement Method: [ ] Pumped [X] Poured
Seal Type: [X] Neat Cement [ ] Cement Grout [ ] Concrete Grout

Gravel Packed: [X] Yes [ ] No
From **50** feet to **260** feet

9. WATER LEVEL
Static water level **152** feet below land surfac
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 5-27-98