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. 74365
Permit No.
Basin 153
NOTICE OF INTENT NO. 40155

1. OWNER NV DEPT OF TRANSPORTATION
MAILING ADDRESS 1263 SO. STEWART ST.
CARSON CITY, NV 89712

ADDRESS AT WELL LOCATION
EUREKA TOWNSITE- NDOT STATION

2. LOCATION NE 1/4 SW 1/4 Sec. 13 T 19N N/S R 53E E EUREKA County
PERMIT NO. _____ (Issued by Water Resources) | 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
Removed well vault				
Drilled out PVC to bottom				
Pumped neat cement to surface				
used 14 bags cement				

Date started 9/14/98, 19__
Date completed 9/14/98, 19__

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 30 Feet Depth Cased 28 Feet

HOLE DIAMETER (BIT SIZE)

	From	To
6.5 Inches	0 Feet	30 Feet
Inches	Feet	Feet
Inches	Feet	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
2.5	PVC		0	28

Perforations:
Type perforation N/A
Size perforation N/A
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 30
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 25 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 1654

Signed _____ (By driller performing actual drilling on-site or contractor)
Date 9/25/98