

CORRECTED
 STATE OF NEVADA
 DIVISION OF WATER RESOURCES
WELL DRILLER'S REPORT

OFFICE USE ONLY

Log # 7443
 Permit # 59
 Basin I

NOTICE OF INTENT NO. 35614

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

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

1. OWNER **James Foster** ADDRESS AT WELL LOCATION
 MAILING ADDRESS **P. O. Box 741**
Battle Mountain, NV 89820
1569-1600 East Street, Battle Mountain, Nv. 89820

2. LOCATION **SW** 1/4 **NW** 1/4 Sec. **4** T **31N** N/S R **45E** E **Lander** County
 PERMIT NO. **11-280-10** 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	Thickness
top soil		0	3	3
gravel		3	45	42
brown clay		45	50	5
green clay		50	78	28
brown clay		78	86	8
green clay		86	110	24
brown clay		110	118	8
brown sand		118	127	9
brown clay		127	130	3

8. WELL CONSTRUCTION
 Depth Drilled **130** Feet Depth Cased **130** Feet

HOLE DIAMETER (BIT SIZE)
 From To
10inch Inches **0** Feet **130** 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	12.99	.188	0	130

Perforations:
 Type perforation **Mill Cut**
 Size perforation **1/8 inch**

From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal **50feet** Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout

Gravel Packed: Yes No
 From **50** feet to **130** feet

9. WATER LEVEL
 Static water level **14.3** feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature **cool** °F Quality **unknown**

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name **Parsons Drilling, Inc.** Contractor
 Address **P.O. Box 1265** Contractor
Fallon, NV 89407-1265
 Nevada contractor's license number issued by the State Contractor's Board **29064**
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1753**

Signed *Wayne Parsons*
 By driller performing actual drilling on-site or contractor
 Date **1-13-96**

Date started **12/14/96**, 19
 Date completed **12/14/96**, 19

7. WELL TEST DATA

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

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