WHITE - DIVISION OF WATER RESOURCES
CANARY - CLIENT'S COPY
PINK - WELL DRILLER'S COPY

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**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. 74502
Permit No.
Basin

NOTICE OF INTENT NO. I 181

1. OWNER **LARRY & MARGIE EVANS**
MAILING ADDRESS **821 AESOP DR.**
**ELKO, NV 89801**

ADDRESS AT WELL LOCATION
**SMITH CREEK NEAR JIGGS, NV**

2. LOCATION **NW** 1/4 **NW** 1/4 Sec. **20** T **30N** N/S R **57E** E **ELKO** County
PERMIT NO. _____ Issued by Water Resources
**84-007** Parcel No.
**SMITH CREEK RANCHES** 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 | 1 | 1 |
| BOULDERS & SAND | | 1 | 19 | 18 |
| DECOMPOSED GRANITE | X | 19 | 140 | 121 |

Date started **7/20/98**, 19__
Date completed **7/20/98**, 19__

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

| G.P.M. | Draw Down (Feet Below Static) | Time (Hours) |
|---|---|---|
| 15 | | 3 |

**8. WELL CONSTRUCTION**
Depth Drilled **140** Feet Depth Cased **140** Feet

**HOLE DIAMETER (BIT SIZE)**

| | From | To |
|---|---|---|
| 10 5/8 Inches | 0 Feet | 140 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 | 140 |

**Perforations:**
Type perforation **MILLSLOT**
Size perforation **3/16 X 3**
From **120** feet to **140** 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 **140** feet

**9. WATER LEVEL**
Static water level **51** 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 **1689**

Signed [signature] By driller performing actual drilling on-site or contractor
Date 7-22-98