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. 78512
Permit No.
Basin 42

NOTICE OF INTENT NO. 4[illegible]434

1. OWNER **VERN SHIPTON**
MAILING ADDRESS **5861 SO. CARSON**
CARSON CITY, NV 89701

ADDRESS AT WELL LOCATION **SW CORNER OF BA[illegible]PATE AND 4TH STREET**

2. LOCATION **NW** 1/4 **SE** 1/4 Sec. **3** T **36N** N/S R **58** E **ELKO** County
PERMIT NO. _____ Issued by Water Resources
019-011-001 Parcel No.
HUMBOLDT ACRES #2 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
TOP SOIL		0	3	3
SILT STONE		3	60	57
SILT STONE & BLUE CLAY	105	60		
MIX			140	80

Date started **8/16/99**, 19__
Date completed **8/17/99**, 19__

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

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
10		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 **MILL SLOT**
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 **75** feet below land surface
Artesian flow ____ G.P.M. ____ P.S.I.
Water temperature **COLD** °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 **8/19/99**

USE ADDITIONAL SHEETS IF NECESSARY