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. 80442
Permit No.
Basin 45

NOTICE OF INTENT NO. **43381**

1. OWNER **ROCKY ROCKWELL**
MAILING ADDRESS **P.O. BOX 8050**
SPRING CREEK, NV 89815

ADDRESS AT WELL LOCATION **OFF MT. VIEW DRIVE NEAR**
LAMOILLE, NV

2. LOCATION **NW** 1/4 **NE** 1/4 Sec. **32** T **33N** N/S R **58E** E **ELKO** County
PERMIT NO. Issued by Water Resources
007-080-OBO 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
BOULDERS & SAND		3	60	57
SAND & GRAVEL	135	60	160	100

Date started **06/20/2000**, 19__
Date completed **06/22/2000**, 19__

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

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
70		8

8. **WELL CONSTRUCTION**
Depth Drilled **160** Feet Depth Cased **160** Feet

HOLE DIAMETER (BIT SIZE)

		From		To	
10 5/8	Inches	0	Feet	160	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	160

Perforations:
Type perforation **MILLSLOT**
Size perforation **3/16 X 3**
From **140** feet to **160** 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 **100**
Placement Method: [X] Pumped [ ] Poured
Seal Type: [X] Neat Cement [ ] Cement Grout [ ] Concrete Grout

Gravel Packed: [X] Yes [ ] No
From **100** feet to **160** feet

9. **WATER LEVEL**
Static water level **15** feet below land surface
Artesian flow G.P.M. P.S.I.
Water temperature **C** °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 **06/23/2000**

USE ADDITIONAL SHEETS IF NECESSARY