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. 81146
Permit No.
Basin 179

NOTICE OF INTENT NO. 37573A

1. OWNER JEFF BARTLEY
MAILING ADDRESS 2363 NO. 5TH ST.
ELKO, NV 89801

ADDRESS AT WELL LOCATION DUCK CREEK RANCH

2. LOCATION SW 1/4 SW 1/4 Sec. 19 T 18N N/S R 65E E WHITE PINE County
PERMIT NO. (Issued by Water Resources) 10-200-18 (Parcel No.) TRACT OF LAND (Subdivision Name)

3. **WORK PERFORMED**
[ ] New Well [ ] Replace [ ] Recondition
[ ] Deepen [X] Abandon [ ] Other

4. **PROPOSED USE**
[X] Domestic [ ] Irrigation [ ] Test
[ ] Municipal/Industrial [ ] Monitor [ ] Stock

5. **WELL TYPE**
[ ] Cable [ ] Rotary [ ] RVC
[ ] Air [ ] Other

6. **LITHOLOGIC LOG**

Material	Water Strata	From	To	Thickness
Perforated with air perforator from 50-80 feet				
Pumped 8 bags of abandonite with 40 gallon of water per bag				
Pumped 4 bags of cement from 0-20 feet				

Date started 05/03/2000 , 19__
Date completed 05/03/2000 , 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 ____ Feet Depth Cased 80 Feet

HOLE DIAMETER (BIT SIZE)

	From	To
Inches	Feet	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	80

Perforations:
Type perforation AIR PERFORATOR
Size perforation 1 X 3/16
From 50 feet to 80 feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet

Surface Seal: [ ] Yes [X] No
Depth of Seal
Placement Method: [ ] Pumped [ ] Poured
Seal Type: [ ] Neat Cement [ ] Cement Grout [ ] Concrete Grout

Gravel Packed: [ ] Yes [X] No
From ____ feet to ____ feet

9. **WATER LEVEL**
Static water level 35 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 05/11/2000

USE ADDITIONAL SHEETS IF NECESSARY