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. 81635
Permit No.
Basin 176

NOTICE OF INTENT NO. 43401

1. OWNER **JIMMY & ELLEN SARGENT**
MAILING ADDRESS **P.O. BOX 226**
INDIAN SPRINGS, NV 89018

ADDRESS AT WELL LOCATION **WRIGHT ROAD**

2. LOCATION **NW** 1/4 **NW** 1/4 Sec. **15** T **28N** N/S R **58E** E **ELKO** County
PERMIT NO. Issued by Water Resources
007-03A-026 Parcel No.
RUBY LAKE ESTATES 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
SANDY SOIL		0	3	3
SAND & GRAVEL		3	60	57
BROWN CLAY		60	80	20
GRAVEL & SAND	80	80	100	20

Date started **09/22/2000**, 19___
Date completed **09/25/2000**, 19___

7. **WELL TEST DATA**

TEST METHOD: Bailer | Pump | X Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
100+		5

8. **WELL CONSTRUCTION**
Depth Drilled **100** Feet Depth Cased **100** Feet

HOLE DIAMETER (BIT SIZE)

		From	To
10 5/8 Inches		0 Feet	100 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	100

Perforations:
Type perforation **MILLSLOT**
Size perforation **3/16 X 3**
From **80** feet to **100** 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: X Pumped | Poured
Seal Type: X Neat Cement | Cement Grout | Concrete Grout

Gravel Packed: X Yes | No
From **50** feet to **100** feet

9. **WATER LEVEL**
Static water level **21** 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 **09/27/2000**

USE ADDITIONAL SHEETS IF NECESSARY