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

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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. 82603
Permit No. 66313
Basin 1/4

NOTICE OF INTENT NO. NONE

1. OWNER Charles M. Brown
MAILING ADDRESS 7465 Buckskin Ave.
Las Vegas NV 89129

ADDRESS AT WELL LOCATION None

2. LOCATION NE ¼ SE ¼ Sec. 13 T 15 N/S R 59 E White Pine County

PERMIT NO. None (Issued by Water Resources) | None (Parcel No.) | None (Subdivision Name)

3. WORK PERFORMED
☐ New Well ☐ Replace ☐ Recondition
☐ Deepen ☐ Abandon ☒ Other Existing

4. PROPOSED USE
☐ Domestic ☐ Irrigation ☐ Test
☐ Municipal/Industrial ☐ Monitor ☒ Stock

5. WELL TYPE
☒ Cable ☐ Rotary ☐ RVC
☐ Air ☐ Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
I went down the hole with a 5" x 20' bailer, it went down to 620'. Then put on a 4" x 22' bailer and went down to 940' where I ran out of cable.				

RECEIVED
01 FEB -9 PM 12:53
STATE ENGINEERS OFFICE

Date started Nov. 1, 1999
Date completed Nov 1, 1999

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 ____ 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)
8"			-1	12
6"			12	unknown

Perforations:
Type perforation unknown
Size perforation " "
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet

Surface Seal: ☐ Yes ☐ No
Depth of Seal ____
Placement Method: ☐ Pumped ☐ Poured
Seal Type: ☐ Neat Cement ☐ Cement Grout ☐ Concrete Grout
Gravel Packed: ☐ Yes ☐ No
From ____ feet to ____ feet

9. WATER LEVEL
Static water level 610' feet below land surface
Artesian flow ____ G.P.M. ____ P.S.I.
Water temperature ____ °F Quality ____

10. DRILLER'S CERTIFICATION
This well was [redacted] under my supervision and the report is true to the best of my knowledge.

Name Orvan R Maynard (Contractor)
Address PO Box 64 Lund NV 89317 (Contractor)

Nevada contractor's license number issued by the State Contractor's Board 047226
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1556
Signed Orvan R Maynard (By driller performing actual drilling on site or contractor)
Date Feb 7-01