

STATE OF NEVADA
DIVISION OF WATER RESOURCES

OFFICE USE ONLY
Log No. 83726
Permit No. _____
Basin 58

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

WELL DRILLER'S REPORT

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. 45280

1. OWNER Reese Valley Hay Co. ADDRESS AT WELL LOCATION Antelope Valley-Kathy Well
MAILING ADDRESS HC 61 Box 100
Battle Mountain, NV 89820

2. LOCATION SW 1/4 NE 1/4 Sec. 10 T 25 N 42 E Lander County
PERMIT NO. 21596 Issued by Water Resources Parcel No. _____ Subdivision Name _____

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Abandon Other _____

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	Thick-ness
sand & gravel		250	270	
sand & br. clay		270	279	9
clay, sand & gravel		279	284	5
sand & gravel		284	286	2
br. clay little coarse		286		
sand			288	2
sand & gravel		288	304	16
sand & br. clay		304	309	5
sand & gravel		309	364	55
clay & sand		364	369	5
sand & little br. clay		369	372	3
sand/gravel little clay		372	377	5
clay/coarse sand		377	381	4
gravel & sandy clay		381	446	65

8. WELL CONSTRUCTION
Depth Drilled 446 Feet Depth Cased 444 Feet

HOLE DIAMETER (BIT SIZE)
From 15-1/4 Inches 250 Feet To 446 Feet
Inches _____ Feet _____ Feet
Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
14		.250		

Perforations:
Type perforation Triple row mill slot
Size perforation .125
From 243 feet to 444 feet
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
Depth of Seal N/A Neat Cement
Placement Method: Pumped Cement Grout
 Poured Concrete Grout

Gravel Packed: Yes No
From N/A feet to _____ feet

9. WATER LEVEL
Static water level 163.82 feet below land surface
Artesian flow _____ G.P.M. _____ P.S.i.
Water temperature cool °F Quality good

Date started 3-29-01, 19____
Date completed 4-3-01, 19____

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input checked="" type="checkbox"/> Pump <input type="checkbox"/> Air Lift	<u>3100</u>	<u>27.40</u>	<u>7 hrs</u>
Pumping level <u>191.22</u>			

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name Humboldt Drilling & Pump Co., Inc. Contractor
Address 4675 W. Winnemucca Blvd Contractor
Winnemucca, Nevada 89445
Nevada contractor's license number issued by the State Contractor's Board 015234
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1572
Signed [Signature]
By driller performing actual drilling on-site or contractor
Date 4/11/01