

STATE OF NEVADA
 DIVISION OF WATER RESOURCES
WELL DRILLER'S REPORT

OFFICE USE ONLY
 Log No. 83760
 Permit No. _____
 Basin 188-191
M. Dillon
 08 Jan 2009

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

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

NOTICE OF INTENT NO. **44786**

1. OWNER **COUNTY OF ELKO**
 MAILING ADDRESS **569 COURT STREET**
ELKO, NV 89801

ADDRESS AT WELL LOCATION **PILOT VALLEY, NV NEAR WEST WENDOVER**
6913 L
ELKO County
M. Dillon
 08 Jan 2009

2. LOCATION **NW 1/4 NW 1/4 Sec. 17 T 35N**
 PERMIT NO. **66299**
 Issued by Water Resources Parcel No. _____

N/S R **65E** E
TRACT OF LAND
 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	Thickness
TOPSOIL		0	2	2
GRAVEL & SAND		2	14	12
BROWN SILTSTONE W/ INTERBEDDED SMALL GRAVEL	200	14	515	501
	275			
	370			
	460			

8. WELL CONSTRUCTION
 Depth Drilled **515** Feet Depth Casad **515** Feet
 HOLE DIAMETER (BIT SIZE)
 16 Inches From 0 Feet To 40 Feet
 12.25 Inches From 40 Feet To 515 Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
12.75	25.2	.250	0	40
8 5/8	15.5	.188	+1	515

Perforations:
 Type perforation **MILLSLOT**
 Size perforation **3/16 X 3**
 From **295** feet to **315** feet
 From **395** feet to **415** feet
 From **475** feet to **515** feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal **50** Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From **50** feet to **515** feet

9. WATER LEVEL
 Static water level **198** 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

Date started **04/17/2001**
 Date completed **04/20/2001**

Address **P.O. BOX 850**
 Contractor

7. WELL TEST DATA

TEST METHOD:	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	100+	5
G.P.M.		

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 *Doris Alford*
 By driller performing actual drilling on-site or contractor
 Date **04/26/2001**

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 01 MAY 29 PM 1:06
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