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. 83771
Permit No.
Basin 49

NOTICE OF INTENT NO. 46930

1. OWNER **BRENT CHRISTOFFERSON**
MAILING ADDRESS **698 LAST CHANCE #7**
EKLO, NV 89801

ADDRESS AT WELL LOCATION **SO SIDE OF LOUISANA**

2. LOCATION **SE** 1/4 **NW** 1/4 Sec. **7** T **34N** N/S R **56E** E **ELKO** County
PERMIT NO. (Issued by Water Resources) **032-005-049** (Parcel No.) **LAST CHANCE #3** (Subdivision Name)

3. WORK PERFORMED
[ ] New Well [ ] Replace [ ] Recondition
[X] 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
BLUE CLAY		400	420	20
HARD ROCK	440	420	520	100

ORIGINAL WELL DRILLED UNDER INTENT NO. 41836

Date started **05/25/2001**, 19__
Date completed **05/31/2001**, 19__

7. WELL TEST DATA
TEST METHOD: [ ] Bailer [ ] Pump [X] Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
35		3

8. WELL CONSTRUCTION
Depth Drilled **520** Feet Depth Cased **440** Feet

HOLE DIAMETER (BIT SIZE)

		From		To	
6 1/8	Inches	400	Feet	520	Feet
	Inches		Feet		Feet
	Inches		Feet		Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
4.5	8	.188	320	440

Perforations:
Type perforation **TORCH CUT**
Size perforation **1/8 X 4**
From **400** feet to **440** 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
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 **233** 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 (By driller performing actual drilling on-site or contractor)
Date **06/01/2001**

USE ADDITIONAL SHEETS IF NECESSARY