

OFFICE USE ONLY
 Log No. 83981
 Permit No. _____
 Basin. 049

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. 46720
420 mtn. city Hwy.

1. OWNER BERRY-HINCKLEY INDUSTRIES ADDRESS AT WELL LOCATION ELKO NV
 MAILING ADDRESS P.O. Box 11020
RENO, NV 89510-1020
 2. LOCATION SE 1/4 SE 1/4 Sec. 16 T. 34 N. R. 345 E ELKO County
 PERMIT NO. 001 131 005
 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	Thickness
<u>UNKNOWN</u>				
<u>Abandoned By Pouring neat Cement Slurry to the surface and removing vault @ 25'</u>				
<u>measured bottom</u>				
<u>RECEIVED</u>				
<u>01 JUL - 2 AM 11:31</u>				
<u>MW 5</u>				
<u>MW 4</u>				
<u>MW 5</u>				
<u>MW 6</u>				
<u>MW 7</u>				
<u>MW 8</u>				
<u>MW 11</u>				

8. WELL CONSTRUCTION
 Depth Drilled UNKNOWN Feet Depth Cased UNKNOWN Feet
 HOLE DIAMETER (BIT SIZE)
 From UNKNOWN Inches To _____ Feet
 _____ Inches _____ Feet
 _____ Inches _____ Feet
 CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>1"</u>		<u>Sch. 40</u>	<u>UNKNOWN</u>	

 Perforations:
 Type perforation UNKNOWN
 Size perforation _____
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type:
 Depth of Seal UNKNOWN Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From UNKNOWN feet to _____ feet

9. WATER LEVEL
 Static water level 18' feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature Cold °F Quality _____

Date started 6-2-01, 19____
 Date completed 6-2-01, 19____

7. WELL TEST DATA

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

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Har Tech Drilling Contractor
 Address Po Box 940 Meridian ID 83680 Contractor
 Nevada contractor's license number issued by the State Contractor's Board. 0078018
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller. M 2179
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date 6/18/01