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. 85210
Permit No.
Basin 49

NOTICE OF INTENT NO. 46956A

1. OWNER **CRUZ MARIN**
MAILING ADDRESS **P.O. BOX 1360**
ELKO, NV 89803

ADDRESS AT WELL LOCATION **SW CORNER OF MOUNTAIN**
26TH STREET

2. LOCATION **SE** 1/4 **NE** 1/4 Sec. **19** T **35N** N/S R **56E** E **ELKO** County
PERMIT NO. Issued by Water Resources | **036-016-001** Parcel No. | **MVR #4** 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
PERFORATE 50-80 FEET WITH HOLTE PERFORATOR				
PUMP WELL FULL OF ABANDONITE 20-80 FEET				
PUMP CEMENT 0-20 FEET				

Date started **08/07/2001**, 19__
Date completed **08/07/2001**, 19__

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 **80** 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)
6 5/8	13	.188	+1	80

Perforations:
Type perforation
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 **69** feet below land surface
Artesian flow G.P.M. P.S.I.
Water temperature °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 [signature] By driller performing actual drilling on-site or contractor
Date **09/11/2001**

USE ADDITIONAL SHEETS IF NECESSARY