

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

OFFICE USE ONLY
 Log No. 85320
 Permit No. _____
 Basin 47

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. 4346

1. OWNER **KAREN DAVIS**
 MAILING ADDRESS **P.O. BOX 333**
ELKO, NV 89801

ADDRESS AT WELL LOCATION **WEST BULLION ROAD**

2. LOCATION **NW 1/4 SE 1/4 Sec. 21 T 34N** N/S R **55E E** **ELKO** County
 PERMIT NO. **006-09H-020** **TRACT OF LAND**
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
TOPSOIL		0	2	2
BROWN CLAY		2	15	13
BLACK CLAY		15	120	105
BLACK GRAVEL	130	120	140	20
BLUE CLAY		140	160	20

8. **WELL CONSTRUCTION**
 Depth Drilled **160** Feet Depth Cased **160** Feet
HOLE DIAMETER (BIT SIZE)
 From **10 5/8** Inches To **160** Feet
 From _____ Inches To _____ Feet
 From _____ Inches To _____ Feet
CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	13	.188	+1	160

Perforations:
 Type perforation **MILLSLOT**
 Size perforation **3/16 X 3**
 From **140** feet to **160** feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type: Neat Cement
 Depth of Seal **50** Cement Grout
 Placement Method: Pumped Poured Concrete Grout
 Gravel Packed: Yes No
 From **50** feet to **160** feet

Date started **09/11/2001**, 19____
 Date completed **09/12/2001**, 19____

9. **WATER LEVEL**
 Static water level **51** feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

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	15	3
G.P.M.		

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 *Dari W...*
 By driller performing actual drilling on-site or contractor
 Date **09/13/2001**