

WELL DRILLER'S REPORT

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

Log No.

Permit No.

Basin

ONS

NOTICE OF INTENT NO. 47619

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

1. OWNER **MARILYN FAZZARY**
 MAILING ADDRESS **P.O. BOX 281451**
LAMOILLE, NV 89828

ADDRESS AT WELL LOCATION **605 BUCKHORN ROAD**

2. LOCATION **NE** 1/4 **NE** 1/4 Sec. **26** T **33N**
 PERMIT NO. **023-024-009**

N/S R **57E** E **ELKO** County
PLEASANT VALLEY ESTATES 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
 Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
TOPSOIL		0	3	3
BROWN CLAY		3	8	5
BOULDERS & GRAVEL		8	65	57
SILTSTONE		65	150	85
SAND & GRAVEL	150	150	180	30

8. WELL CONSTRUCTION

Depth Drilled **180** Feet Depth Cased **180** Feet

HOLE DIAMETER (BIT SIZE)

	From	To	
10 5/8 Inches	0	180	Feet
Inches			Feet
Inches			Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	13	.188	+1	180

Perforations:

Type perforation	MILLSLOT
Size perforation	3/16 X 3
From	160 feet to 180 feet
From	feet to feet
From	feet to feet
From	feet to feet
From	feet to feet

Surface Seal: Yes No

Depth of Seal **50**

Placement Method: Pumped Poured

Seal Type:

Neat Cement
 Cement Grout
 Concrete Grout

Gravel Packed: Yes No

From **50** feet to **180** feet

9. WATER LEVEL

Static water level **121** 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

Jari M...
 By driller performing actual drilling on-site or contractor

Date **4/3/2002**

Date started **4/1/2002**, 19__
 Date completed **4/2/2002**, 19__

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift
 G.P.M. Draw Down (Feet Below Static) Time (Hours)

30

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