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. 88586
Permit No.
Basin 109

NOTICE OF INTENT NO. 50396

1. OWNER SANTA MARGARITA RANCH
MAILING ADDRESS 136 E. Walker Rd.
Yerington, NV. 89447

ADDRESS AT WELL LOCATION 136 E. Walker Rd.
Yerington, NV. 89447

2. LOCATION SE 1/4 SW 1/4 Sec. 31 T 11 N/S R 27 E Lyon County
PERMIT NO. 49277 (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
SAND		0	8	8
BROWN WET CLAY		8	15	7
LARGE ROUNDED GRAVEL & SAND		15	40	25
LARGE GRAVEL & BOULDERS		40	80	40
GRAVEL, SAND, BOULDERS		80	130	50
BROWN CLAY		130	290	160
SANDY CLAY		290	300	10
COARSE SAND, FINE GRAVEL		300	400	100
FINE SAND, MED GRAVEL		400	550	150
GREY, GREEN CLAY		550	620	70

100 GPM @ 320'
[redacted] GPM @ 550'

PUMPED 18 BAGS OF ABANDONITE MIXED WITH 720 GALLONS OF WATER TO SURFACE
PUMPED CEMENT 0-10'

Date started 5-15-02, 19__
Date completed 5-17-02, 19__

7. WELL TEST DATA
TEST METHOD: ☐ Bailer ☐ Pump ☐ Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
		1 hr.

8. WELL CONSTRUCTION
Depth Drilled ____ Feet Depth Cased ____ Feet

HOLE DIAMETER (BIT SIZE)

		From	To
5 1/2 Inches		0 Feet	620 Feet
Inches		Feet	Feet
Inches		Feet	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)

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 ____ 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 1654

Signed ____ (By driller performing actual drilling on-site or contractor)
Date 05-30-02