

OFFICE USE ONLY  
 Log No. 90588  
 Permit No. \_\_\_\_\_  
 Basin 51  
 NOTICE OF INTENT NO. 51132

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

1. OWNER Newmant Pete ADDRESS AT WELL LOCATION \_\_\_\_\_  
 MAILING ADDRESS PO Box 669 \_\_\_\_\_  
Carlin, Nevada 89822 \_\_\_\_\_  
 2. LOCATION NW 1/4 NW 1/4 Sec. 30 T. 36 N. R. 51 E. Eureka County  
 PERMIT NO. \_\_\_\_\_  
 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
Materials Used				
57 Gallons Super Plug				
1.2 Gallons Portland Cement 20' plug				
1/4 50lbs Bag Super Plug				
1/3 94lbs Portland Cement				

8. WELL CONSTRUCTION  
 Depth Drilled 600' Feet Depth Cased 600' 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)
<u>1.25</u>				

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

Date started August 8, 2003, 19\_\_\_\_\_  
 Date completed August 8, 2003, 19\_\_\_\_\_  
 RECEIVED  
 13 AUG 19 AM 10:21  
 STATE ENGINEERS OFFICE

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			

9. WATER LEVEL  
 Static water level Dry 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 SKLUND Drilling Contractor  
 Address PO Box 2748 Contractor  
EIKO, NEVADA 89803  
 Nevada contractor's license number issued by the State Contractor's Board 0030823  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller M2100  
 Signed Shawn A. Jank  
 By driller performing actual drilling on site or contractor  
 Date 8-8-03