

Log No. **90755**  
 Permit No. **049**  
 Issin. **049**

**WELL DRILLER'S REPORT**

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

NOTICE OF INTENT NO **45020**

PRINT OR TYPE ONLY  
 DO NOT WRITE ON BACK

1. OWNER **RAYMUNDO GONZALES** ADDRESS AT WELL LOCATION **None**  
 MAILING ADDRESS **his permanent address**

2. LOCATION **N.W. 1/4 NW 1/4 Sec. 7 T. 34 N/S R. 56 E. ELKO** County  
 PERMIT NO. **N/A** Issued by Water Resources **12223, BKF Unit 3** Parcel No. **Last Chance Ranch** Subdivision Name

3. WORK PERFORMED  
 New Well  Replace  Recondition  Domestic  Irrigation  Test  Cable  Rotary  RVC  
 Deepen  Abandon  Other  Municipal/Industrial  Monitor  Stock  Air  Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Soil		0	1	1
Clay		1	6	5
Clay & gravel		6	16	10
Clay		16	42	26
Gravel		42	48	6
Blue clay		48	170	122
Soft gray shale		170	230	60
Very soft crinoid block sandstone & siltstone		230	245	15
Gray soft shale		245	250	5
T.D. 250				
Water gravel at 42-48' cased off until sealed.				

8. WELL CONSTRUCTION  
 Depth Drilled **250** Feet Depth Cased **251** Feet  
 HOLE DIAMETER (BIT SIZE)  
 From To  
**1.0** Inches **0** Feet **34** Feet  
**8** Inches **34** Feet **250** Feet  
 Inches Feet Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<b>6 7/8</b>	<b>12.92</b>	<b>.168</b>	<b>+1</b>	<b>250</b>

Perforations:  
 Type perforation **Torch cut**  
 Size perforation **1/4 x 4 x 2/81**  
 From feet to feet  
 From feet to **240** feet  
 From **214** feet to **243** feet  
 From feet to feet  
 From feet to feet

Surface Seal:  Yes  No Seal Type:  
 Depth of Seal **52**  Neat Cement  
 Placement Method:  Pumped  Cement Grout  
 Poured  Concrete Grout  
 Bentonite  
 Gravel Packed:  Yes  No  
 From **50** feet to **243** feet

9. WATER LEVEL  
 Static water level **7.5** feet below land surface  
 Artesian flow **No** G.P.M. P.S.I.  
 Water temperature **cold** °F Quality **Fair**

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.  
 Name **MUTH DRILLING CO** Contractor  
 Address **203 PINE ST. ELKO, NV 89801** Contractor  
 Nevada contractor's license number issued by the State Contractor's Board **10819**  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **632**  
 Signed **James Muth** By driller performing actual drilling on site or contractor  
 Date

Date started **4-17-03**, 19  
 Date completed **5-13-03**, 19

7. WELL TEST DATA

TEST METHOD: <input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift			
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)	