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. 91603
Permit No.
Basin 045

NOTICE OF INTENT NO. **50047**

1. OWNER **JOE McCASSIE**
MAILING ADDRESS **P.O. BOX 936**
FERNLEY, NV 89408

ADDRESS AT WELL LOCATION **NW CORNER OF DYSART DR. & BUCKSKIN CIR.**

2. LOCATION **NE** 1/4 **SE** 1/4 Sec. **29** T **33N** N/S R **58E** E **ELKO** County
PERMIT NO. Issued by Water Resources
033-002-019 Parcel No.
DYSART RANCH Subdivision Name

3. **WORK PERFORMED**
X New Well, Replace, Recondition, Deepen, Abandon, Other

4. **PROPOSED USE**
X Domestic, Irrigation, Test, Cable, Municipal/Industrial, Monitor, Stock

5. **WELL TYPE**
X Rotary, RVC, X Air, Other

6. **LITHOLOGIC LOG**

Material	Water Strata	From	To	Thickness
TOPSOIL		0	1	1
BOULDERS		1	10	9
BOULDERS, SAND & GRAVEL	150	10	200	190

SEALED SURFACE WITH 21 BAGS OF 3/8 HOLE PLUG AND 3 BAGS OF CEMENT

Date started **5/19/2003**, 19__
Date completed **5/20/2003**, 19__

7. **WELL TEST DATA**

TEST METHOD: Bailer, Pump, X Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
15		4

8. **WELL CONSTRUCTION**
Depth Drilled **200** Feet Depth Cased **195** Feet

HOLE DIAMETER (BIT SIZE)

		From	To
10 5/8	Inches	0 Feet	200 Feet
	Inches	Feet	Feet
	Inches	Feet	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	13	.188	+1	195

Perforations:
Type perforation **MILLSLOT**
Size perforation **3/16 X 3**
From **175** feet to **195** feet
From feet to feet
From feet to feet
From feet to feet
From feet to feet

Surface Seal: X Yes No
Depth of Seal **50**
Placement Method: Pumped, X Poured
Seal Type: X Neat Cement, Cement Grout, Concrete Grout

Gravel Packed: X Yes No
From **50** feet to **195** feet

9. **WATER LEVEL**
Static water level **155** 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 [signature] By driller performing actual drilling on-site or contractor
Date **5/26/2003**

USE ADDITIONAL SHEETS IF NECESSARY