

STATE OF NEVADA  
 DIVISION OF WATER RESOURCES  
**WELL DRILLER'S REPORT**

OFFICE USE ONLY  
 Log.No. 92466  
 Permit No. \_\_\_\_\_  
 Basin 53

PRINT OR TYPE ONLY  
 DO NOT WRITE ON BACK

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

NOTICE OF INTENT NO. **54358**

1. OWNER **BACTECH NEVADA**  
 MAILING ADDRESS **249 THIRD STREET**  
**ELKO, NV 89801**

ADDRESS AT WELL LOCATION **TONKIN SPRINGS MINESITE**

2. LOCATION **NE 1/4 SE 1/4 Sec. 3 T 231/2N**  
 PERMIT NO. **M/O 1302** | **WELL #015-03-TH5**  
Issued by Water Resources | Parcel No.

N/S R **49E** E **EUREKA** County  
**TRACT OF LAND**  
Subdivision Name

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

4.  Domestic  Municipal/Industrial

**PROPOSED USE**  
 Irrigation  Test  Stock  
 Monitor  Air

5. **WELL TYPE**  
 Cable  Rotary  RVC  
 Other

6. **LITHOLOGIC LOG**

Material	Water Strata	From	To	Thick-ness
TOPSOIL		0	2	2
SOIL & ROCK		2	4	2
BROWN ROCK		4	80	76
BLACK ROCK		80	230	150
FRACTURED ROCK	240	230	260	30
BLACK ROCK-HARD		260	350	90

Pulled casing after completing pump test  
 Pumped 36 bags of abandonite from 20-350  
 Pumped 12 bags of cement from 0-20

8. **WELL CONSTRUCTION**  
 Depth Drilled **350** Feet Depth Cased **350** Feet  
**HOLE DIAMETER (BIT SIZE)**  
 10 Inches From 0 Feet To 350 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	PVC	SCH 40	+2.5	350

**Perforations:**  
 Type perforation **SCREEN**  
 Size perforation **.032**  
 From **90** feet to **350** feet  
 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

9. **WATER LEVEL**  
 Static water level **127** 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 *Dani Aron*  
 By driller performing actual drilling on-site or contractor

Date **12/10/2003**

Date started **12/6/2003**, 19  
 Date completed **12/7/2003**, 19

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

**10-15**

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