

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



OFFICE USE ONLY
 Log No. 93629
 Permit No. _____
 Basin 177

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. **54377**

1. OWNER **MALCOLM WITTIG**
 MAILING ADDRESS **P.O. 238**
WELLS, NV 89835

ADDRESS AT WELL LOCATION **5 MILES SOUTH OF WELLS**

2. LOCATION **SW 1/4 NW 1/4 Sec. 3 T 36N**
 PERMIT NO. **008-330-028**
Issued by Water Resources Parcel No.

N/S R **62E E** County **ELKO**
TRACT OF LAND
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
TOPSOIL		0	3	3
CONSOLIDATED GRAVEL		3	38	35
BROWN CLAY		38	80	42
HARD LIMESTONE		80	150	70
HARD BLACK ROCK		150	265	115
FIRM SILTSTONE		265	275	10
HARD BLACK ROCK		275	370	95
HARD BLACK ROCK W/ RED QUARTZ		370	500	130

Plugged by pumping 20 bags of abandonite from 20 to 500 feet and cementing from 0 to 20 feet

8. WELL CONSTRUCTION
 Depth Drilled **500** Feet Depth Cased _____ Feet

HOLE DIAMETER (BIT SIZE)
 From **6** Inches To **500** Feet
 _____ Inches Feet
 _____ Inches 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

Surface Seal: Yes No Seal Type: Neat Cement
 Cement Grout
 Concrete Grout
 Placement Method: Pumped Poured
 Gravel Packed: Yes No 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 _____

Date started **3/11/2004**, 19
 Date completed **3/11/2004**, 19

7. WELL TEST DATA

TEST METHOD:	Draw Down (Feet Below Static)		Time (Hours)
	G.P.M.		
DRY			

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 **1998**
 Signed *Bradley D. Wiest*
 By driller performing actual drilling on-site or contractor
 Date **4/16/2004**

APR 23 AM 11:07
 DIVISION OF WATER RESOURCES OFFICE