

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

OFFICE USE ONLY
 Log No. **98032**
 Permit No. _____
 Basin **Ø42**



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. **55105**

1. OWNER **TADD BISHOP**
 MAILING ADDRESS **P. O. BOX 138**
WELLS, NV 89835

ADDRESS AT WELL LOCATION **7 MI. NORTH OF WELLS, WEST OFF HIGHWAY 93**

2. LOCATION **NE 1/4 NW 1/4 Sec. 17 T 38N**
 PERMIT NO. **008-570-012**
 Issued by Water Resources Parcel No.

N/S R **63E E** County **ELKO**
 Subdivision Name **BAR HL Parcel 3**

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
BROWN SOIL W/ROCK MIX		0	22	22
BROWN CLAY		22	26	4
BROWN ILTSTONE FIRM		26	35	9
BROWN ROK AND GRAVEL		35		
CONGLOMERT			65	30
BROWN CLAY FIRM		65	110	45
YELLOW/LIGHT BROWN		110		
SILTSTONE			165	55
BROWN SILTSTONE /SOFT	X	165		
LAYERS PEA GRAVEL MIX			200	35

8. WELL CONSTRUCTION

Depth Drilled **200** Feet Depth Cased **200** Feet

HOLE DIAMETER (BIT SIZE)

	From	To
10-5/8 Inches	0	200
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	200

Perforations:
 Type perforation **MILL SLOT**
 Size perforation **3/16 X 3**

From **190** feet to **200** feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

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

Gravel Packed: Yes No
 From **50** feet to **200** feet

9. WATER LEVEL
 Static water level **75** feet below land surface
 Artesian flow _____ G.P.M. P.S.I.
 Water temperature _____ °F Quality **GOOD**

Date started **7/25/2005**, 19____
 Date completed **7/26/2005**, 19____

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. Wiers**
 By driller performing actual drilling on-site or contractor
 Date **8/29/2005**

7. WELL TEST DATA

TEST METHOD:	Bailer	Pump	Air Lift
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)	
25		3	