

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

OFFICE USE ONLY  
 Log No. **98053**  
 Permit No. **054**  
 Basin **054**

I

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. **55092**

1. OWNER **BILL RECORD**  
 MAILING ADDRESS **299 WEED ROAD**  
**PINE BUSH, NY 12566**

ADDRESS AT WELL LOCATION **LOT 1 ON HILL TOP ROAD**

2. LOCATION **NW 1/4 NW 1/4 Sec. 27 T 29N**

N/S R **46E E** County **ELKO**

PERMIT NO. **07-240-37**  
 Issued by Water Resources Parcel No.

**CAMP LTD**  
 Subdivision Name

3. WORK PERFORMED

New Well  Replace  Recondition  
 Deepen  Abandon  Other

4. PROPOSED USE

Domestic  Irrigation  
 Municipal/Industrial  Monitor

5. WELL TYPE

Cable  Rotary  RVC  
 Stock  Air  Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
TOPSOIL, BLACK		0	12	12
GRAVEL, BROWN		12	14	2
BROWN CLAY		14	35	21
BRN ROCK & GRAVEL		35	50	15
LIMESTONE, BLACK		50	110	60
FRACTURED LIMESTONE, BLACK	XXX	110	140	30

8. WELL CONSTRUCTION

Depth Drilled **140** Feet Depth Cased **140** Feet

HOLE DIAMETER (BIT SIZE)

From	To	Feet	Feet
<b>10 5/8</b> Inches	<b>0</b> Feet	<b>140</b> Feet	
Inches	Feet	Feet	Feet
Inches	Feet	Feet	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<b>6.625</b>	<b>13</b>	<b>.188</b>	<b>+1</b>	<b>140</b>

Perforations:

Type perforation **MACHINED MILL SLOT**

Size perforation **1/8 x 3, 6 ROW**

From <b>120</b>	feet to	<b>140</b>	feet
From	feet to		feet
From	feet to		feet
From	feet to		feet
From	feet to		feet

Surface Seal:  Yes  No

Depth of Seal **100**

Placement Method:  Pumped  Poured

Seal Type:

Neat Cement  
 Cement Grout  
 Concrete Grout

Gravel Packed:  Yes  No

From **100** feet to **140** feet

9. WATER LEVEL

Static water level **22** feet below land surface

Artesian flow  G.P.M.  P.S.I.

Water temperature **COLD** °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 **1998**

Signed **Bradley D. Wise**  
 By driller performing actual drilling on-site or contractor

Date **6/29/2005**

Date started **6/22/2005**, 19\_\_  
 Date completed **6/24/2005**, 19\_\_

7. WELL TEST DATA

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

**100+** **2**