



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

OFFICE USE ONLY
 Log No. 99882
 Permit No. _____
 Basin 649

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. **56575**

1. OWNER **FLORENTINO AYALA**
 MAILING ADDRESS **870 NEVADA CIRCLE**
ELKO, NV 89801

ADDRESS AT WELL LOCATION **RIO DRIVE**

2. LOCATION **SW 1/4 NW 1/4 Sec. 1 T 34N**
 PERMIT NO. _____
 Issued by Water Resources

N/S R **54E** E _____
ELKO County
ADOBE HEIGHTS
 Subdivision Name

005-51D-059
 Parcel No.

3. WORK PERFORMED
 New Well
 Replace
 Recondition
 Deepen
 Abandon
 Other

4. PROPOSED USE
 Domestic
 Municipal/Industrial
 Irrigation
 Monitor
 Test
 Stock

5. WELL TYPE
 Cable
 Rotary
 RVC
 Air
 Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
TOPSOIL		0	1	1
RED SILTSTONE		1	10	9
TAN SILTSTONE		10	130	120
GRAY SILTSTONE		130	180	50
WHITE VOLC TUFF		180	245	65
GRAY CLAY/SHALE		245	380	135
GRAY SHALE		380	415	35
GRAY CLAY		415	485	70
LT BROWN TUFF		485	560	75
GRAY SHALE	XX	560	840	280

8. WELL CONSTRUCTION
 Depth Drilled **840** Feet
 Depth Cased **840** Feet

HOLE DIAMETER (BIT SIZE)
 From **10 5/8** Inches To **0** Feet
 From **840** Feet To _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6.625	13	.188	+1	840

Perforations:
 Type perforation **MACHINED MILL SLOT**
 Size perforation **3/16 X 3, 6 ROW**

From	740	feet to	760	feet
From	780	feet to	800	feet
From	820	feet to	840	feet

Surface Seal: Yes No
 Depth of Seal **50'**
 Placement Method: Pumped Poured
 Seal Type: Neat Cement Cement Grout Concrete Grout
 Gravel Packed: Yes No
 From **50** feet to **840** feet

9. WATER LEVEL
 Static water level **342** feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature **COLD** °F Quality _____

Date started **12/6/2005**
 Date completed **12/21/2005**

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	5		7.5 HRS

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 **1166**
 Signed *[Signature]*
 By driller performing actual drilling on-site or contractor
 Date **1/31/2006**