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

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*

OFFICE USE ONLY
Log No. 102831
Permit No.
Basin 049

NOTICE OF INTENT NO. 59031

1. OWNER PETER FREIGANG
MAILING ADDRESS 19 W. HANNUM BLVD.
SAGINAW, MI 48602

ADDRESS AT WELL LOCATION ANDYS WAY
Subdivision Name: ELKO SUMMIT ESTATES II *County:* ELKO

2. LOCATION SW ¼ NW ¼ Sec 36 T 34N N/S R 55 E
PERMIT/WAIVER No. 006-090-035
*Issued by Water Resources* Parcel No.

Latitude
Longitude
UTM E 0606704 ☐ NAD 27
N 4516250 ☒ NAD 83/WGS 84

3. WORKED PERFORMED
☒ New Well ☐ Replace ☐ Recondition
☐ Deepen ☐ 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 | Thickness |
|---|---|---|---|---|
| TOP SOIL | | 0 | 2 | 2 |
| SILTSTONE | | 2 | 40 | 38 |
| BROWN ASH | 80 | 40 | 100 | 60 |
| BLACK ASH | | 100 | 120 | 20 |
| N 40.790409 | | | | |
| W 115.734354 NAD27 | | | | |
| ~~N 40.790332~~ | | | | |
| ~~W 115.735155 NAD83~~ | | | | |

Date started: 5-Feb , 20 07
Date completed: 5-Feb , 20 07

7. *Water Level*
*Static water level:* 35 feet below land surface
Artesian Flow: G.P.M. P.S.I.
Water Temperature: COLD °F
Quality:

8. WELL TEST DATA
TEST METHOD: ☐ Bailer ☐ Pump ☒ Air Lift

| G.P.M. | Draw Down (Feet Below Static) | Time (Hours) |
|---|---|---|
| 6 | | 4 |

9. *WELL CONSTRUCTION*
Depth Drilled 120 Feet Depth Cased 120 Feet

*HOLE DIAMETER (BIT SIZE)*

| | | From | | To | |
|---|---|---|---|---|---|
| 10-5/8 | Inches | 0 | Feet | 120 | 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 | 13 | .188 | +1 | 120 |
| | | | | |
| | | | | |

*Perforations:*
Type of perforation MILL SLOT
Size of perforation 3/16x3
From 80 feet to 100 feet
From feet to feet
From feet to feet
From feet to feet
From feet to feet

*Annular Seal:* ☒ Yes ☐ No
☒ Neat Cement 5 to 50 ☒ Pumped ☐ Poured
☐ Cement Grout to ☐ Pumped ☐ Poured
☐ Concrete Grout to ☐ Pumped ☐ Poured
☐ ≥30% Bentonite Grout to ☐ Pumped ☐ Poured

Gravel Pack: ☒ Yes ☐ No 50 to 120 ☐ Pumped ☒ Poured
Type: PEA GRAVEL
Bentonite Chips: ☐ Yes ☒ No to ☐ Pumped ☐ Poured
Type:

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
By driller performing actual drilling on site or contractor
Date 2/15/2007

(Rev. 05-06)

**USE ADDITIONAL SHEETS IF NECESSARY**