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

OFFICE USE ONLY
Log No. 105584
Permit No.
Basin 049

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. ~~12711~~

1. OWNER c/o USPCI
MAILING ADDRESS 5665 Flatiron Parkway
Boulder, CO 80301

ADDRESS AT WELL LOCATION SEt Corner of Silver and West Main
Elko, NV 89801
Subdivision Name: County: Elko

2. LOCATION SW ¼ SW ¼ Sec 15 T 34N N/S R 55 E
PERMIT/WAIVER No. MO616 (Issued by Water Resources) Parcel No.
Latitude 40.82639 Longitude 115.77243
UTM E N ☐ NAD 27 ☒ 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
Remove Vault				
Remove pipe and knock out bottc				
with trimmie pipe.				
Pump hole full of Neat Cement		0	20	20
Plug and Abandond				
N 40.826484				
W 115.771520 NAD27				

Date started: 9, March, 20 2007
Date completed: 9, March, 20 2007

9. WELL CONSTRUCTION
Depth Drilled Feet Depth Cased Feet

HOLE DIAMETER (BIT SIZE)

		From		To	
9	Inches	0	Feet	20	Feet
	Inches		Feet		Feet
	Inches		Feet		Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
2.375	.698	pvc	+2	20

Perforations:
Type of perforation
Size of perforation
From feet to feet
From feet to feet
From feet to feet
From feet to feet
From feet to feet

Annular Seal: ☐ Yes ☐ No
☒ Neat Cement 0 to 20 ☐ Pumped ☐ Poured
☐ Cement Grout to ☐ Pumped ☐ Poured
☐ Concrete Grout to ☐ Pumped ☐ Poured
☐ ≥30% Bentonite Grout to ☐ Pumped ☐ Poured
Gravel Pack: ☐ Yes ☐ No to ☐ Pumped ☐ Poured
Type: 3/8 PEA GRAVE;
Bentonite Chips: ☐ Yes ☐ No to ☐ Pumped ☐ Poured
Type:

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

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

	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
APPROX			

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name SHAREL C. FERTIG SR. dba FERTIG DRILLING COMPANY (Contractor)
Address P.O. BOX 525 (Contractor)
ELKO, NV 89803
Nevada contractor's license number issued by the State Contractor's Board 031904
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1584
Signed (By driller performing actual drilling on site or contractor)
Date 3-17-07

(Rev. 05-06)

USE ADDITIONAL SHEETS IF NECESSARY