

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

OFFICE USE ONLY

Log No. 106613

Permit No. _____

Basin 110B

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. 61613

1. OWNER Walker Lake GID ADDRESS AT WELL LOCATION Walker Lake
MAILING ADDRESS 175 Wassuk Way
Walker Lake, NV 89415 Subdivision Name: _____ County: Mineral

2. LOCATION SE 1/4 SE 1/4 Sec 8 T 09N N/S R 29 E Latitude 38.64973 UTM E NAD 27
PERMIT/WAIVER No. 26630, 26714, 53023 & 53024 Permits Longitude W118.75982 N NAD 83/WGS 84
Issued by Water Resources Nor. Jcs Parcel No. _____

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	Thick-ness
Cobbles		0	22	22
Cobbles & Some Clay		22	500	478
This hole did not show enough water. Abandoned bottom 400 ft with bentonite (gopher grout) and the top 100' with cement.				
2008 SEP 11 PM 12:56				
STATE ENGINEER OFFICE				
N 38.649810				
W 118.758847 NAD27				

9. WELL CONSTRUCTION

Depth Drilled 500 Feet Depth Cased _____ Feet

HOLE DIAMETER (BIT SIZE)

From	To	Feet	Feet
<u>14 3/4</u> Inches	<u>0</u> Feet	<u>500</u> Feet	
_____ Inches	_____ Feet	_____ Feet	_____ Feet
_____ Inches	_____ Feet	_____ Feet	_____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Flt (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>N/A</u>		<u>N/A</u>		

Perforations:

Type of perforation N/A

Size of perforation _____

From _____ feet to _____ feet

Annular Seal: Yes No

Neat Cement to _____ Pumped Poured

Cement Grout to _____ Pumped Poured

Concrete Grout 0 to 100 Pumped Poured

≥30% Bentonite Grout to _____ Pumped Poured

Gravel Pack: Yes No _____ to _____ Pumped Poured

Type: _____

Bentonite Chips: Yes No _____ to _____ Pumped Poured

Type: _____

7. Water Level

Static water level: N/A feet below land surface

Artesian Flow: _____ G.P.M. _____ P.S.I.

Water Temperature: _____ °F

Quality: _____

8. WELL TEST DATA

TEST METHOD: Bailor Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>N/A</u>		<u>N/A</u>

10. DRILLER'S CERTIFICATION

This well was drilled under my supervision and the report is true to the best of my knowledge.

Name Hydro Resources Nevada Inc dba Humboldt Drilling & Pump Co
Contractor

Address 4975 W Winnemucca Blvd
Contractor

Winnemucca, NV 89445

Nevada contractor's license number _____
issued by the State Contractor's Board 56797

Nevada driller's license number issued by the _____
Division of Water Resources, the on-site driller 1713

Signed Cheryl Jaynes
By driller performing actual drilling on site or contractor

Date 8/26/2005