

PRINT OR TYPE ONLY  
 DO NOT WRITE ON BACK

**WELL DRILLER'S REPORT**  
 Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

Log No. \_\_\_\_\_  
 Permit No. \_\_\_\_\_  
 Basin **207**

NOTICE OF INTENT NO. **59949**

1. OWNER **Brett & Alana Hardy** ADDRESS AT WELL LOCATION **770 N Row**  
 MAILING ADDRESS **Po Box 22 Lund NV 89317** **NAO 27 N 38° 52' 33.9"**  
**W 115° 00' 30.3"**

2. LOCATION **S.W. 1/4 NE 1/4 Sec. 28 T. 12** N/S R. **62 E. White Pine** County  
 PERMIT NO. **N/A** **13-087-01** **Lund 100 acre Plat**

3. WORK PERFORMED  
 New Well  Replace  Recondition  
 Deepen  Abandon  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
Silty clay		0	7	
Cobbles gravel		7	16	
Silty clay		16	22	
gravel		22	25	
Silty clay		25	33	
gravel Silty clay		33	37	
Clay gravel		37	45	
Silty clay		45	52	
gravel		52	54	
clay-gravel		54	85	
gravel	water	85	86	
Silty clay		86	89	
gravel	water	89	91	
Silty clay		91	113	
gravel	water	113	114	
Silty clay		114	118	
gravel	water	118	118.5	
clay		118.5	125	
gravel	water	125	125.2	
clay		125.2	142	
gravel	water	142	143	
clay		143	147	
gravel		147	150	
clay		150	152	

**38.876083° N**  
**115.088417° W**  
**NAO 27**

8. WELL CONSTRUCTION  
 Depth Drilled **152** Feet Depth Cased **152** Feet

HOLE DIAMETER (BIT SIZE)  
 From To  
**10** Inches **0** Feet **152** Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<b>6 7/8</b>	<b>12.9</b>	<b>.188</b>	<b>1</b>	<b>9</b>
<b>6 7/8</b>		<b>3/4 90 PVC</b>	<b>9</b>	<b>152</b>

Perforations:  
 Type perforation **mill**  
 Size perforation **.232**  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From **112** feet to **152** feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  
 Neat Cement  
 Cement Grout  
 Concrete Grout  
 Depth of Seal **50**  
 Placement Method:  Pumped  Poured  
 Gravel Packed:  Yes  No  
 From **50** feet to **152** feet

9. WATER LEVEL  
 Static water level **81** feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature **Cold** °F Quality **good**

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.  
 Name **Maynard Well Drilling** Contractor  
 Address **Po Box 64 Lund NV 89317** Contractor  
 Nevada contractor's license number issued by the State Contractor's Board **047224**  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1556**  
 Signed **Oran Maynard**  
 By driller performing actual drilling on site or contractor  
 Date **Aug 21 - 09**

Date started **Aug 12**, 20**09**  
 Date completed **Aug 3**, 20**09**

7. WELL TEST DATA

TEST METHOD:  Bailor  Pump  Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<b>40</b>	<b>10</b>	<b>1 hr</b>