

019

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

OFFICE USE ONLY
Log No. 116990
Permit No.
Basin 207

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. 67211

1. OWNER Scott Gregorson
MAILING ADDRESS 316 Ogden Ave. Ely, NV 89301

ADDRESS AT WELL LOCATION 840 North First East Street, Lead, NV
Subdivision Name: Sew Mill Estates County: White Pine

2. LOCATION NE 1/4 SE 1/4 Sec 21 T12 N38°53'15" E
PERMIT/WAIVER No. 01-530-18
Issued by Water Resources Parcel No.

Latitude 38°53'15" UTM E NAD 27
Longitude 116°00'29" N 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	Thick-ness
TOP Soil		0	7	7
Sand - Boulders		7	55	48
Clay - Boulders		55	130	75
Hard Clay		130	250	120
Fractured Rock	*	250	300	50
Clay - (Green)	*	300	315	15
Clay		315	320	5

9. WELL CONSTRUCTION
Depth Drilled 320 Feet Depth Cased 320 Feet
HOLE DIAMETER (BIT SIZE)
From 11 Inches To 320 Feet
Inches Feet Feet Feet
Inches Feet Feet Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 1/2	PVC	sch 40	0	320

Perforations:
Type of perforation Sew cut
Size of perforation 1/8" x 3/4"
From 240 feet to 320 feet
From feet to feet
From feet to feet
From feet to feet
From feet to feet

Annular Seal: Yes No
 Neat Cement to Pumped Poured
 Cement Grout to Pumped Poured
 Concrete Grout 0 to 50 Pumped Poured
 230% Bentonite Grout to Pumped Poured
Gravel Pack: Yes No 50 to 320 Pumped Poured
Type: 1/4" Minus
Bentonite Chips: Yes No to Pumped Poured
Type:

Date started: 7-2-2013
Date completed: 7-5-2013

7. Water Level
Static water level: 97 feet below land surface
Artesian Flow: G.P.M. P.S.I.
Water Temperature: 64.8 °F
Quality: Fair

8. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailor <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	35		2

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge
Name: David Drilling and Pumps Contractor
Address: HC 61 Box 54 Hiko NV 89017 Contractor
Nevada contractor's license number issued by the State Contractor's Board: 0028266
Nevada driller's license number issued by the Division of Water Resources, the on-site driller: 119
Signed: Mike Davis By driller performing actual drilling on-site or contractor
Date: 7-2-2013