

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

OFFICE USE ONLY
Log No. 117290
Permit No. 70820
Basin 179

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. 69640

1. OWNER SAM HENRIOD
MAILING ADDRESS He-33 Box 33897
Las Vegas NV 89010

ADDRESS AT WELL LOCATION
Hwy 93 Logie Junction
Subdivision Name: _____ County: White Pine

2. LOCATION NE 1/4 NE 1/4 Sec 33 T 26 N R 05 E
PERMIT/WAIVER No. 70820
Issued by Water Resources R-739 Parcel No. _____

Latitude N 40° 05' 03.0" UTM E NAD 27
Longitude W 114° 30' 54.2" 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 mud

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>Red Volcanic clay</u> <u>AND some cobbles</u>		<u>700</u>	<u>715</u>	<u>15'</u>
<u>Cemented gravel</u> <u>AND SAND</u>	<input checked="" type="checkbox"/>	<u>715</u>	<u>732</u>	<u>17'</u>
<u>Cemented cobbles</u> <u>AND SAND</u>	<input checked="" type="checkbox"/>	<u>732</u>	<u>790</u>	<u>66'</u>
<u>Cobbles AND Boulders</u>	<input checked="" type="checkbox"/>	<u>790</u>	<u>810</u>	<u>12'</u>
<u>waiver R-739</u>				
<u>Deepens well log 116821</u>				
<u>NAD 27</u> <u>40.0839016N</u> <u>114.16405110W</u>				
Date started: <u>6/30/13</u> , 20				
Date completed: <u>7/9/13</u> , 20				

9. WELL CONSTRUCTION

Depth Drilled	Feet	Depth Cased	Feet
<u>810</u>		<u>810</u>	

HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet
<u>12 1/4"</u>	<u>700'</u>	<u>810'</u>	

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>10 3/4</u>		<u>.250</u>	<u>650'</u>	<u>810'</u>

Perforations:
Type of perforation sawed
Size of perforation 1/8 x 3" Double Row
From 690' feet to 810' feet
From _____ feet to _____ feet

Annular Seal: Yes No

<input type="checkbox"/> Neat Cement	to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> Cement Grout	to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> Concrete Grout	to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> ≥30% Bentonite Grout	to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured

Gravel Pack: Yes No to _____ Pumped Poured
Type: _____
Bentonite Chips: Yes No to _____ Pumped Poured
Type: _____

7. Water Level
Static water level: _____ feet below land surface
Artesian Flow: 3000 G.P.M. 10 P.S.I.
Water Temperature: lukewarm
Quality: clear

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name Leach Drilling INC Contractor
Address po Box 599 Contractor
Silver Springs, NV 89429
Nevada contractor's license number _____
issued by the State Contractor's Board 31841-1740
Nevada driller's license number issued by the Division of Water Resources, the on-site driller _____
Signed [Signature] 1876
By driller performing actual drilling on-site or contractor
Date 7/25/13

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 type="checkbox"/> Air Lift			
<u>ARTESIAN FLOW</u>			
<u>RECEIVED</u>			
<u>2013 JUL 30 10:30 AM</u>			
<u>STATE ENGINEERS OFFICE</u>			