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

OFFICE USE ONLY
Log No. 115561
Permit No. 24822
Basin 059

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. 68630

1. OWNER Farr Farms
MAILING ADDRESS HC61 Box 180
Battle Mountain, NV 89820

ADDRESS AT WELL LOCATION Antelope Valley
Battle Mountain, NV 89820
Subdivision Name: County: Lander

2. LOCATION SE ¼ SW ¼ Sec 13 T 24N N/S R 40 E
PERMIT/WAIVER No. 24822 (Issued by Water Resources) Parcel No.

Latitude 39.94652 N
Longitude -117.42817 W
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
Clay		650	662	12
Rock	X	662	685	23
Rock w/ Clay		685	710	25
Fractured Rock	XX	710	920	210

deepen well log 100% to

NAD27
39.94652°N
117.42722°W

Date started: 19-Mar, 20 12
Date completed: 24-Mar, 20 12

9. WELL CONSTRUCTION
Depth Drilled 920 Feet Depth Cased 920 Feet

HOLE DIAMETER (BIT SIZE)

		From		To	
11 3/4	Inches	650	Feet	920	Feet
	Inches		Feet		Feet
	Inches		Feet		Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8 5/8	22.38	.250	440	920

Perforations:
Type of perforation Mill Cut
Size of perforation .250
From 440 feet to 920 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 to ☐ Pumped ☐ Poured
☐ ≥30% Bentonite Grout to ☐ Pumped ☐ Poured

Gravel Pack: ☐ Yes ☐ No to ☐ Pumped ☐ Poured
Type: [redacted]
Bentonite Chips: ☐ Yes ☒ No to ☐ Pumped ☐ Poured
Type:

7. Water Level
Static water level: 181 feet below land surface
Artesian Flow: G.P.M. P.S.I.
Water Temperature: Cool °F
Quality: Unknown

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

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
1600	20	12

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name Parsons Drilling, Inc. (Contractor)
Address P.O. Box 1265 (Contractor)
Fallon, NV 89407
Nevada contractor's license number issued by the *State Contractor's Board* 29064
Nevada driller's license number issued by the Division of Water Resources, the *on-site driller* 2307
Signed Wayne Parsons (By driller performing actual drilling on site or contractor)
Date 4/17/2012

(Rev 03-06)

USE ADDITIONAL SHEETS IF NECESSARY