

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

OFFICE USE ONLY
Log No. 120503
Permit No. 78664
Basin 153

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. 71810
951 Diamond Foothill Rd

1. OWNER Chad Bliss ADDRESS AT WELL LOCATION Eureka NV 89316
MAILING ADDRESS PO Box 585 Subdivision Name: _____ County: Eureka
Eureka NV 89316
2. LOCATION SE 1/4 SE 1/4 Sec 24 T 20 S R 53 E Latitude N38°34.772 UTM E NAD 27
PERMIT/WAIVER No. 78664 007-340-25 Longitude W115°57.083 N NAD 83/WGS 84
Issued by Water Resources Parcel No. _____

3. WORKED PERFORMED New Well Replace Recondition
 Deepen Other
4. PROPOSED USE Domestic Irrigation Test Stock
 Municipal/Industrial Monitor
5. WELL TYPE Cable Rotary RVC
 Air Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
TOP Soil		0	12	12
sand - Boulders		12	120	108
Clay - Boulders		120	170	50
Hard Rock		170	290	120
Fractured Rock	X	290	320	30
Hard Rock		320	340	20
Fractured Rock	X	340	370	30
Hard Rock		370	380	10

2014 AUG 14 AM 11:11
DAVIS ENGINEERS & DRILLERS

9. WELL CONSTRUCTION
Depth Drilled 378 Feet Depth Cased 378 Feet
HOLE DIAMETER (BIT SIZE)
From 0 To 378
Inches 11 Feet _____
Inches _____ Feet _____
Inches _____ Feet _____
CASING SCHEDULE
Size O.D. (Inches) Weight/Ft. (Pounds) Wall Thickness (Inches) From (Feet) To (Feet)
6 5/8 Steel .188 0 378
Perforations:
Type of perforation torch cut
Size of perforation 1/4" x 6"
From 288 feet to 388 feet
From _____ feet to _____ feet
Annular Seal: Yes No
 Neat Cement Pumped Poured
 Cement Grout _____ to _____ Pumped Poured
 Concrete Grout 3 to 53 Pumped Poured
 ≥30% Bentonite Grout _____ to _____ Pumped Poured
Gravel Pack: Yes No 53 to 388 Pumped Poured
Type: 1/2" MMUS
Bentonite Chips: Yes No _____ to _____ Pumped Poured
Type: _____

7. Water Level
Static water level: 280 feet below land surface
Artesian Flow: 0 G.P.M. _____ P.S.I.
Water Temperature: cold °F
Quality: good

8. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	<u>50</u>	<u>2</u>	<u>2</u>

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name Davis 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 1191
Signed Mike Davis
By driller performing actual drilling on-site or contractor
Date 8-1-2014

(Rev. 05-06)

USE ADDITIONAL SHEETS IF NECESSARY