

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

OFFICE USE ONLY
Log No. 125231
Permit No. _____
Basin No. 153

PRINT OR TYPE IN BLACK INK 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. 74360
WELL NAME (if applicable): _____

1. OWNER/CLIENT NAME Joe Bingham
MAILING ADDRESS 340 juniper Hill Rd
Beno NV 89519

DETAILED ADDRESS AT WELL LOCATION 007-350-06
Hilderbrand
Subdivision Name: _____ County: Eureka

2. PLS LOCATION SW 1/4 SW 1/4 15 Sec 20 T2S 54 E
PERMIT/WAIVER NO. 007-350-06
Issued by Water Resources Current Parcel No.

Latitude 39° 35.554 N UTM E NAD 27
Longitude 115° 53.102 W UTM N NAD 83/WGS 84

3. WORKED PERFORMED
 New Well Deepen: Orig WL# _____
 Replacement: Original well log # _____
 Recondition: Original well log # _____

4. PROPOSED USE
 Domestic Irrigation Monitor
 Mining / Dewater Com / Ind Stock
 Test / Other Mun / QM Rec

5. WELL TYPE
 Auger Rotary RVC
 Air Mud Sonic
 Other

6. LITHOLOGIC LOG					
Material Encountered	Lost Circ.	Water Strata	From	To	Thickness
Red ash			0	40	
limestone		X	40	60	
Red ash		X	60	135	
Black shale			135	142	
Red ash			142	310	
Black shale			310	400	
Artesian area					

9. WELL CONSTRUCTION			
Depth Drilled:	Feet	Depth Cased:	Feet
<u>400</u>		<u>400</u>	
HOLE DIAMETER (BIT SIZE)			
From	To	From	To
<u>10 5/8</u>	<u>0</u>	Inches	<u>3 1/2</u>
<u>8 1/2</u>	<u>3 1/2</u>	Inches	<u>400</u>
		Inches	Feet

CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 5/8</u>		<u>.188</u>	<u>+18"</u>	<u>400</u>

PERFORATIONS:			
Type of perforation:	Size of perforation:	From	To
<u>mill slot</u>	<u>3 By 90 mill</u>	<u>120</u>	<u>140</u>
		<u>380</u>	<u>400</u>
		<u>0</u>	

ANNULAR MATERIALS			
Material	From	To	Method
<input checked="" type="checkbox"/> Sanitary Seal	<u>0</u>	<u>100</u>	<input checked="" type="checkbox"/> Pumped <input type="checkbox"/> Poured
<input checked="" type="checkbox"/> Neat Cement	<u>0</u>	<u>400</u>	<input checked="" type="checkbox"/> Pumped <input type="checkbox"/> Poured
<input type="checkbox"/> Cement Grout			<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
<input type="checkbox"/> Concrete Grout			<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
<input type="checkbox"/> Bentonite Chips			<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
<input type="checkbox"/> Bentonite Grout			<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
<input type="checkbox"/> 15 % <input type="checkbox"/> 20 % <input type="checkbox"/> Other, explain: _____			
<input checked="" type="checkbox"/> Gravel Pack [> 0.2 in.]	<u>100</u>	<u>400</u>	<input type="checkbox"/> Pumped <input checked="" type="checkbox"/> Poured
<input type="checkbox"/> Sand Pack [< 0.2 in.]			<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
<input type="checkbox"/> Other, explain:			<input type="checkbox"/> Pumped <input type="checkbox"/> Poured

Date started: 7-28, 20 16
Date completed: 7-6, 20 16

7. WATER QUALITIES
Static water level: 0 Feet below land surface
Artesian Flow: 1/2 G.P.M. P.S.I.
Water Temperature: 49 ° Fahrenheit
Water Quality: _____

8. WELL TEST DATA		
Test Method:	G.P.M.	Recorded Time (Hours)
<input type="checkbox"/> Bailor <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	<u>20</u>	<u>6</u>
	<u>NAD 27</u>	
	<u>39.592638</u>	
	<u>115.884145</u>	

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision. This report is true to the best of my knowledge.
Name: Rosenlund Drilling L.L.C.
Address: Hc 60 Box 890 Ruby Valley NV 89833

Nevada contractor's license number as issued by the State Contractor's Board: 0079932
Nevada well driller's license number as issued by the Nevada Division of Water Resources (on-site driller): 2465
Signed: [Signature]
Date: _____