

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

OFFICE USE ONLY
Log No. 125493
Permit No. _____
Basin No. 049

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. 74839
WELL NAME (if applicable): _____

1. OWNER/CLIENT NAME MARK ELDRIDGE
MAILING ADDRESS 430 MOUNTAIN CITY HWY UNIT 11
ELKO, NV 89801

DETAILED ADDRESS AT WELL LOCATION RUSTARD
299 Rusty's Rd
Subdivision Name RURAL County ELKO

2. PLS LOCATION NE 1/4 NE 1/4 7 Sec 34N N/S 55 E
PERMIT/WAIVER NO 006-09B-081
Issued by Water Resources Current Parcel No.

Latitude _____ UTM E 599849 NAD 27
Longitude _____ UTM N 4522680 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	Loat Circ	Water Strata	From	To
ALLUVIUM			0	20'
SAND & GRAVEL			20'	100'
LIGHT GREEN CLAY WITH GRAVEL			100'	140'
GRAVEL WITH RED CLAYS			140'	210'
WHITE CLAYS & SHALES			210'	320'
LIGHT GREEN CLAYS & SOME SHALE IN IT	XX		320'	420'
HIT 1ST GOOD WATER @ 380'				

9. INSTRUCTION
Depth Drilled: 420' Feet Depth Cased: 420' Feet

HOLE DIAMETER (BIT SIZE)			
From	To	Feet	Feet
10 5/8	0	420'	
Inches		Feet	Feet
Inches		Feet	Feet
Inches		Feet	Feet

CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6.625	13	.188	+1.5'	420'

ANNULAR MATERIALS

Sanitary Seal	Yes	No		
<input checked="" type="checkbox"/> Neat Cement	<input checked="" type="checkbox"/>	<input type="checkbox"/>	5'	25'
<input type="checkbox"/> Cement Grout	<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/> Concrete Grout	<input type="checkbox"/>	<input type="checkbox"/>		
<input checked="" type="checkbox"/> Bentonite Chips	<input checked="" type="checkbox"/>	<input type="checkbox"/>	25'	55'
<input checked="" type="checkbox"/> Gravel Pack [> 0.2 in.]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	55'	420'
<input type="checkbox"/> Sand Pack [< 0.2 in.]	<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/> Other, explain:	<input type="checkbox"/>	<input type="checkbox"/>		

PERFORATIONS

Type of perforation: PLASMA CUT

Size of perforation: 3/16" X 4" 6 ROWS

From	Feet	To	Feet
380'		420'	
From	Feet	To	Feet
From	Feet	To	Feet
From	Feet	To	Feet
From	Feet	To	Feet

Date started 27-May, 20 16
Date completed 31-May, 20 16

7. WATER QUALITIES
Static water level 278' Feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: 71 ° Fahrenheit
Water Quality: GOOD

8. WELL TEST DATA

Test Method:	Bailer	Pump	Air Lift	G.P.M.	Draw Down (Feet Below Static)	Recorded Time (Hours)
420'	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	20		1HR.
380'	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	15		1HR.
360'	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	10	<u>NAD 27</u>	.5HR.
340'	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	5	<u>40.850996</u> <u>115.815464</u>	.5HR.

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision. This report is true to the best of my knowledge.

Name HACKWORTH DRILLING INC. Contractor
Address P.O. BOX 850, ELKO, NV 89803 Contractor

Nevada contractor's license number as issued by the State Contractor's Board 020582
Nevada well driller's license number as issued by the Nevada Division of Water Resources (on-site driller) 2329

Signed: [Signature]
By driller performing a well drilling on site or contractor

Date 6/1/2016