WHITE—DIVISION OF WATER RESOURCES
CANARY—CLIENT'S COPY
PINK—WELL DRILLER'S COPY

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

STATE OF NEVADA
DIVISION OF WATER RESOURCES

WELL DRILLER'S REPORT

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

OFFICE USE ONLY
Log No. 44049
Permit No.
Basin 41-414

NOTICE OF INTENT NO. 23959

1. OWNER Thomas & Ruth Tsakamoto
MAILING ADDRESS 685 Douglas
Elko, NV 89801

ADDRESS AT WELL LOCATION SW Corner at
S. 5th St & Van Buren Av

2. LOCATION SW ¼ SW ¼ Sec. 5 T 35N N/S R 57 E Elko County

PERMIT NO. ____ Issued by Water Resources | 26-028-01 Parcel No. | Twin River Ranchos #4 Subdivision Name

3. WORK PERFORMED
☒ New Well ☐ Replace ☐ Recondition
☐ Deepen ☐ Abandon ☐ 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
Top Soil		0	3	3
Clay brown		3	12	9
Brown silt stone		12	41	29
Red silt stone, some gravel	X	41	100	59

Date started 2-21, 19 94
Date completed 2-21, 19 94

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

	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
blow test	40		2

8. WELL CONSTRUCTION
Depth Drilled 100 Feet Depth Cased 100 Feet

HOLE DIAMETER (BIT SIZE)

		From	To
10 5/8 Inches		0 Feet	100 Feet
Inches		Feet	Feet
Inches		Feet	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8		.188	+1 1/2	100

Perforations:
Type perforation millslot
Size perforation 1/8 x 3
From 80 feet to 100 feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet

Surface Seal: ☒ Yes ☐ No
Depth of Seal 50
Placement Method: ☐ Pumped ☒ Poured
Seal Type: ☐ Neat Cement ☐ Cement Grout ☒ Concrete Grout

Gravel Packed: ☒ Yes ☐ No
From 50 feet to 100 feet

9. WATER LEVEL
Static water level 56 feet below land surface
Artesian flow ____ G.P.M. ____ P.S.I.
Water temperature ____ °F Quality ____

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

Name HACKWORTH DRILLING Contractor
Address P.O. Box 850 Contractor
Elko, NV 89803

Nevada contractor's license number issued by the State Contractor's Board 020582

Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1689

Signed [signature] By driller performing actual drilling on site or contractor
Date 3-28-94

(Rev. 3-91) USE ADDITIONAL SHEETS IF NECESSARY (O)-627