

OFFICE USE ONLY
 Log No. 44388
 Permit No. _____
 Basin 049

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

WELL DRILLER'S REPORT
 Please complete this form in its entirety in
 accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. 26520

1. OWNER MARIO CORTEZ ADDRESS AT WELL LOCATION None
 MAILING ADDRESS UNK

2. LOCATION NE 1/4 NW 1/4 Sec 7 T. 34 N. S. 56 E. ELKO County
 PERMIT NO. _____ Issued by Water Resources Parcel No. _____
LOT 18, BLK H, UNIT 3, LAST CHANCE RANCH 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	Thick-ness
Clay & gravel		0	12	12
Humboldt fm		12	94	82
Cobbles, boulders	seep	94	102	8
Shale		102	145	43
	Seep		145	-
Shale (blue-gray)		145	322	177
Blk shale sand	25 yds	322	343	21
Shale		343	352	7
		T.D. 352		

8. WELL CONSTRUCTION
 Depth Drilled 352 Feet Depth Cased 352 Feet
 HOLE DIAMETER (BIT SIZE)
 From To
1.0 Inches 0 Feet 100 Feet
8 Inches 100 Feet 352 Feet
 Inches Feet Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 3/8</u>	<u>12.92</u>	<u>.183</u>	<u>+15</u>	<u>352</u>

Perforations:
 Type perforation Torch cut
 Size perforation _____
 From 140 feet to 150 feet
 From 320 feet to 346 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout
 Depth of Seal _____
 Placement Method: Pumped
 Poured
 Gravel Packed: Yes No
 From 50 feet to 352 feet

9. WATER LEVEL
 Static water level 9.7 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature Cold °F Quality Fair

Date started 4-9, 1994
 Date completed 4-22, 1994

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input checked="" type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift	<u>17</u>	<u>50</u>	<u>2 hrs.</u>

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name MUTH DRILLING Co. Contractor
 Address 203 PINE ST Contractor
ELKO, NV 89801
 Nevada contractor's license number issued by the State Contractor's Board 10819
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 632
 Signed James Y. Muth
 By driller performing actual drilling on site or contractor
 Date 5-5-94