

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

OFFICE USE ONLY  
 Log No. **44795**  
 Permit No. \_\_\_\_\_  
 Basin **001**

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. **24963(?)**

1. OWNER **Quinn River Ranch** ADDRESS AT WELL LOCATION **6 miles South Oregon Border 3 mile North of SR 140**  
 MAILING ADDRESS **St Route 395 Winnemucca, NV 89445**  
 2. LOCATION **NE 1/4 SW 1/4 Sec. 23 T. 47 N. S. R. 30 E Humboldt** County  
 PERMIT NO. **58249** Issued by Water Resources Parcel No. **NA** Subdivision Name **N/A**

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
Sand + Gravel		0	55	55
75% Clay 25% S+G		55	110	55
Sand + Gravel		110	150	40
90% Clay 10% S+G		150	220	70
25% Clay 75% S+G XX		220	260	40

8. WELL CONSTRUCTION  
 Depth Drilled **260** Feet Depth Cased **260** Feet  
 HOLE DIAMETER (BIT SIZE)  
 From To  
**11"** Inches **0** Feet **260** Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<b>6 5/8</b>	<b>12</b>	<b>.188</b>	<b>+1</b>	<b>260</b>

Perforations:  
 Type perforation **Factory Saw Cuts**  
 Size perforation **3/32**  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 Surface Seal:  Yes  No Seal Type:  
 Depth of Seal **50**  Neat Cement  
 Placement Method:  Pumped  Cement Grout  
 Poured  Concrete Grout  
 Gravel Packed:  Yes  No  
 From **50** feet to **260'** feet

9. WATER LEVEL  
 Static water level **189'** feet below land surface  
 Artesian flow **No** G.P.M. **20** P.S.I.  
 Water temperature **Chem.** °F Quality **Good**

Date started **5-7**, 19**94**  
 Date completed **5-9**, 19**94**

7. WELL TEST DATA

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

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.  
 Name **Fred Anderson** Contractor  
 Address **10760 Grass Valley Rd Winnemucca, NV 89445** Contractor  
 Nevada contractor's license number issued by the State Contractor's Board **021467**  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1375**  
 Signed \_\_\_\_\_ by driller performing actual drilling on site or contractor  
 Date **5-10-94**

JUN 20 P 2:54  
 RECEIVED  
 STATE ENGINEERS OFFICE