

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

OFFICE USE ONLY  
 Log No. 79698  
 Permit No. \_\_\_\_\_  
 Basin \_\_\_\_\_

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. **37560**

1. OWNER **CLARENCE MOORE** ADDRESS AT WELL LOCATION **SO END OF NEBRASKA - EAST SIDE**  
 MAILING ADDRESS **P.O. BOX 5947 ELKO, NV 89802**

2. LOCATION **SW** 1/4 **SE** 1/4 Sec. **6** T **34N** N/S R **56E** E **ELKO** County  
 PERMIT NO. \_\_\_\_\_ Parcel No. **32-005-068** Subdivision Name **LAST CHANCE #3**

3. WORK PERFORMED  
 New Well  Replace  Recondition  Domestic  Irrigation  Test  Cable  Rotary  RVC  
 Deepen  Abandon  Other  Municipal/Industrial  Monitor  Stock  Air  Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
TOPSOIL		0	3	3
BROWN SILTSTONE		3	80	77
GRAY SILTSTONE		80	280	200
GRAY CLAY		280	360	80
GRAY SILTSTONE	390	360	420	60

8. WELL CONSTRUCTION  
 Depth Drilled **420** Feet Depth Cased **420** Feet

HOLE DIAMETER (BIT SIZE)  
 10 5/8 Inches From 0 Feet To 420 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	13	.188	+1	420

Perforations:  
 Type perforation **MILLSLOT**  
 Size perforation **3/16 X 3**

From <b>400</b>	feet to	<b>420</b>	feet
From _____	feet to	_____	feet
From _____	feet to	_____	feet
From _____	feet to	_____	feet
From _____	feet to	_____	feet

Surface Seal:  Yes  No Seal Type:  Neat Cement  
 Depth of Seal **50**  Cement Grout  
 Placement Method:  Pumped  Poured  Concrete Grout  
 Gravel Packed:  Yes  No  
 From **50** feet to **420** feet

9. WATER LEVEL  
 Static water level **230** feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature **C** °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, INC** 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 *J. Davis*  
 by driller performing actual drilling on-site or contractor  
 Date **04/13/2000**

Date started **04/10/2000**, 19\_\_\_\_  
 Date completed **04/11/2000**, 19\_\_\_\_

7. WELL TEST DATA

TEST METHOD:	Bailer	Pump	Air Lift
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)	
<b>60</b>		<b>6</b>	