

Log No. **87924**

Permit No. **049**

Basin

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. **47626**

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

1. OWNER **FREHNER CONSTRUCTION**
 MAILING ADDRESS **522 OSINO UNIT #8**
ELKO, NV 89801

ADDRESS AT WELL LOCATION **MAGGIE CREEK RANCH WEST**
OF ELKO

2. LOCATION **SW** 1/4 **SW** 1/4 Sec. **8** T **33N** N/S R **54E** E **ELKO** County
 PERMIT NO. **C-217** Issued by Water Resources Parcel No. **005-500-006** **TRACT OF LAND** 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
TOPSOIL		0	3	3
BROWN CLAY		3	12	9
GRAVEL & BOULDERS		12	40	28
SANDSTONE		40	100	60
SILTSTONE & GRAVEL	120	100	210	110
	160			
	180			

8. **WELL CONSTRUCTION**
 Depth Drilled **210** Feet Depth Cased **210** Feet
HOLE DIAMETER (BIT SIZE)
10 5/8 Inches From **0** Feet To **210** 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** **210**

Perforations:
 Type perforation **MILLSLOT**
 Size perforation **3/16 X 3**
 From **130** feet to **150** feet
 From **190** feet to **210** 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 **100**
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From **100** feet to **210** feet

Date started **4/9/2002** 19__
 Date completed **4/10/2002** 19__

7. **WELL TEST DATA**

TEST METHOD:	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	150+	3
G.P.M.		

9. **WATER LEVEL**
 Static water level **18** 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 *Dave Mea*
 By driller performing actual drilling on-site or contractor
 Date **4/11/2002**