

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

OFFICE USE ONLY
 Log No. 88529
 Permit No. _____
 Basin 054

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. 45493

OWNER **CHARLES MILLSPAUGH**
 MAILING ADDRESS **2740 TALAPOOSA SILVER SPRINGS, NV 89429**

ADDRESS AT WELL LOCATION **HORSHOE CIRCLE #56**

2. LOCATION **NW 1/4 SE 1/4 Sec. 13 T 31N N/S R 49W E EUREKA** County
 PERMIT NO. **003-442-11** Parcel No. **PIONEER PASS #1** 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
LOAM		0	4	4
GRAVEL		4	12	8
BROWN SANDSTONE		12	85	73
BROKEN BROWN SANDSTONE	X	85		
MIXED WITH GRAVEL			146	61

8. WELL CONSTRUCTION
 Depth Drilled **146** Feet Depth Cased **146** Feet
 HOLE DIAMETER (BIT SIZE)
 From **10** Inches To **0** Feet **146** Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6	12.92	188	+1	146

Perforations:
 Type perforation **MILL SLOT**
 Size perforation **3/16 X 3**
 From **125** feet to **146** feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal **53** Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From **53** feet to **146** feet

9. WATER LEVEL
 Static water level **50** feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature **COLD** °F Quality _____

Date started **8/27/2002**, 19____
 Date completed **2/28/2002**, 19____

7. WELL TEST DATA

TEST METHOD:	TEST METHOD:		Time (Hours)
	G.P.M.	Draw Down (Feet Below Static)	
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	APPROX 70	3.5 HRS	

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name **SHAREL C. FERTIG SR., DBA FERTIG DRILLING CO.** Contractor
 Address **P.O. BOX 525** Contractor
ELKO, NEVADA 89803
 Nevada contractor's license number issued by the State Contractor's Board **0031904**
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1584**
 Signed *Sharel Fertig*
 By driller performing actual drilling on-site or contractor
 Date **9/13/2002**

