

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

OFFICE USE ONLY  
 Log No. **89286**  
 Permit No. \_\_\_\_\_  
 Basin **CHS**

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. **47631**

1. OWNER **Travis Monett**  
 MAILING ADDRESS **444 Bartlett Drive, Unit 8**  
**Spring Creek, NV 89815**

ADDRESS AT WELL LOCATION **Bartlett Drive in**  
**Rolling Hills Subdivision**

2. LOCATION **SW 1/4 NW 1/4 Sec. 2 T 33**  
 PERMIT NO. \_\_\_\_\_  
 Issued by Water Resources  
**006-30A-014**  
 Parcel No.

N/S R **56E** E **Elko** County  
**Rolling Hills**  
 Subdivision Name

3. WORK PERFORMED

New Well Deepen  
 Replace Abandon  
 Recondition Other

4. PROPOSED USE

Domestic Municipal/Industrial  
 Irrigation Monitor  
 Test Stock

5. WELL TYPE

Cable X Rotary Other  
 Air

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Top Soil		0	2	2
Brown Clay		2	6	4
Siltstone		6	80	74
Sand and Gravel	80	80	100	20
Siltstone		100	125	25

8. WELL CONSTRUCTION

Depth Drilled **125** Feet Depth Cased **125** Feet

HOLE DIAMETER (BIT SIZE)

From	To	Feet	Feet
<b>10 5/8</b> Inches	<b>0</b> Feet	<b>125</b> Feet	
Inches	Feet	Feet	Feet
Inches	Feet	Feet	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<b>6 5/8</b>	<b>13</b>	<b>.188</b>	<b>+1</b>	<b>125</b>

Perforations:

Type perforation **Mill slot**  
 Size perforation **3/16 X 3**  
 From **104** feet to **125** feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No

Depth of Seal **50**

Placement Method:  Pumped  
 Poured

Seal Type:

Neat Cement  
 Cement Grout  
 Concrete Grout

Gravel Packed:  Yes  No

From **50** feet to **125** feet

9. WATER LEVEL

Static water level **55** 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 \_\_\_\_\_

*David Munn*  
 By driller performing actual drilling on-site or contractor

Date **5/15/2002**

7. WELL TEST DATA

TEST METHOD:  Bailer  Pump  Air Lift

G.P.M. Draw Down (Feet Below Static) Time (Hours)

**18**

**7**

Date started **5/13/2002**, 19\_\_\_\_  
 Date completed **5/14/2002**, 19\_\_\_\_