

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

OFFICE USE ONLY
 Log No. 92410
 Permit No.
 Basin 189B

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. **49040**

1. OWNER **DON MARQUIS**
 MAILING ADDRESS **P.O. BOX 398**
WELLS, NV 89835

ADDRESS AT WELL LOCATION **NORTH OF I-80 AT MOOR**
EXIT EAST OF WELLS

2. LOCATION **NW** 1/4 **NW** 1/4 Sec. **25** T **39N**
 PERMIT NO. **009-14R-001**
 Issued by Water Resources Parcel No.

N/S R **64E** E **ELKO** County
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	Thick-ness
TOPSOIL		0	2	2
BROWN CLAY		2	12	10
CLAY & GRAVEL		12	140	128
VOLCANIC ASH	180	140	340	200
	280			

Sealed with 22 bags of 3/8 holeplug and 3 bags of cement

8. WELL CONSTRUCTION
 Depth Drilled **340** Feet Depth Cased **340** Feet
 HOLE DIAMETER (BIT SIZE)
 From To
10 5/8 Inches **0** Feet **340** 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	340

Perforations:
 Type perforation **MILLSLOT**
 Size perforation **1/8 X 3**
 From **200** feet to **220** feet
 From **320** feet to **340** feet
 From feet to feet
 From feet to feet
 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 **340** feet

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 STATE ENGINEERS OFFICE

Date started **10/20/2003**, 19__
 Date completed **10/22/2003**, 19__

7. WELL TEST DATA

TEST METHOD:	Bailer	Pump	<input checked="" type="checkbox"/> Air Lift
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)	
10		6	

9. WATER LEVEL
 Static water level **100** 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 *Don Marquis*
 By driller performing actual drilling on-site or contractor
 Date **10/24/2003**