

BRIAN SANDOVAL
GOVERNOR

STATE OF NEVADA

LEO DROZDOFF
Director



JASON KING, P.E.
State Engineer

**DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES
DIVISION OF WATER RESOURCES**

901 South Stewart Street, Suite 2002
Carson City, Nevada 89701-5250
(775) 684-2800 · Fax (775) 684-2811
<http://water.nv.gov>

NOTICE OF INTENT CARD
APPROVAL FORM

To: Harris Exploration Drilling

Date: 09/16/2016

Facsimile No.: _____

or E-mail Address: clx89315@yahoo.com

This document was: E-mailed Faxed

NOI Card Number: 71117

Approved

Rejected (See reasons below)

Work performed	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Proposed use of well	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Intended start date	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Waiver/Permit number if applicable	missing	<input checked="" type="checkbox"/>	invalid	<input type="checkbox"/>
Well location (legal description, GPS coordinates)	missing	<input type="checkbox"/>	invalid	<input checked="" type="checkbox"/>
Parcel number	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Address at well location	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Permit number	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Waiver number or NDEP Facility ID Number	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Address of Client	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Name of client/owner	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Contractor's license number	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Onsite well driller's license number	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Drilling company name/address	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Driller's signature	missing	<input type="checkbox"/>	invalid	<input type="checkbox"/>
Replacement well	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

If yes, existing well must be plugged at time the replacement well is drilled, pursuant to NAC 534.300 Replacement Well.

Instructions: PLUGGING 6" DIA TEST WELL. MM-206. WELL CV-6.
UTM: 446705E, 4171439N, NAD 27. NE SW S12 T.3S, R.39E.
SILVER PEAK, CLAYTON VALLEY, NV.

Person reviewing NOI Card: Shannon McDaniel (775)684-2842

Date reviewed: 09/16/2016



**Division of Water Resources
Receipt for Payments**



Ricky Lewis
PO BOX150695
Ely NV 89315

Check #: 1306
Check Date: 9/16/2016
Date Received: 9/16/2016
Receipt #: 26972

FY	Amount	Permit #	Invoice #	Fee Type/Fee desc
2017	\$25.00	NOI#71117		- Notice Of Intent

Total : \$25.00 Notes

FBO Harris Exploration Drilling/260 S. Orange
Street/Escondido/Ca/92025

RECEIVED
2016 SEP 26 AM 11:37
STATE ENGINEERS OFFICE